

Global health researchers urge integrating deworming into HIV care in Africa

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HIV care centers are an important and highly accessed point of care for HIV-infected children and their families in sub-Saharan Africa, but opportunities to address other health issues are being missed. Proven interventions, including routine deworming among young children, could be effectively integrated into HIV care according to a newly published article in *PLoS Neglected Tropical Diseases* by University of Washington researchers.

The article, "Integration of Deworming into HIV Care and Treatment: A Neglected Opportunity," estimates that millions of HIV-infected individuals in sub-Saharan Africa are also infested with [parasitic worms](#), called helminths. The parasitic infestations have enormous [health consequences](#), including anemia, malnutrition, and impaired cognitive development, and may also increase the progression of HIV.

Helen Gerns, the lead researcher on the paper, said that the [World Health Organization](#) (WHO) recommends annual or bi-annual deworming of children in schools as a cost-effective strategy to diminish the consequences of chronic helminth infection. However, many children are not routinely being dewormed through programs in schools. This, despite the fact that standard treatment of soil-transmitted helminth infection entails only a single 400 mg dose of [albendazole](#), making routine deworming of children a simple intervention. In addition to missing those children who are unable to attend school during deworming campaigns, school based deworming misses pre-school aged children.

"Annual deworming of preschool-aged children is safe and highly effective in reducing parasite prevalence and intensity, malnutrition, and risk of stunting, but a formal policy does not yet exist to target this age group," said the researchers. "Because children are infected and often diagnosed with HIV while very young, preschool-aged children can easily be dewormed in HIV clinics, along with their siblings, to reduce the occurrence of [reinfection](#)."

Deworming HIV-infected children may have additional benefits, including delaying the progression of HIV, reducing other infections, and increasing responsiveness to vaccines.

"Population-level data show that regional variations in vaccine efficacy correlate with variations in the prevalence of enteric [gut] pathogens," according to the article. The article cites increased efficiency in the rotavirus vaccine and polio eradication efforts in countries with fewer cases of helminth infections.

"Children who failed to respond to oral poliovirus vaccinations were 25 percent more likely to harbor infections with intestinal parasites than vaccine responders," according to the article.

"Given that deworming is standard medical care among all children in many settings, we should not miss such an effective, inexpensive and practical opportunity to deworm HIV-infected children," said co-author Dr. Judd Walson, assistant professor of global health at the University of Washington.

More information: Gerns HL, Sangaré LR, Walson JL (2012) Integration of Deworming into HIV Care and Treatment: A Neglected Opportunity. PLoS Negl Trop Dis 6(7): e1738.
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