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TITLE

SCHISTOSOMIASIS SURVEILLANCE ACTION IN MUNICIPALITIES CONSIDERED ENDEMIC IN THE STATE OF PARÁ, AMAZON, BRAZIL IN THE YEAR 2024

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ABSTRACT

Data from the National Schistosomiasis Survey conducted in Brazil between 2010 and 2015 revealed that the State of Pará, out of 6,198 examined, presented only 02 positive cases and a 0.02% positivity rate, not reflecting the real situation of the disease in the State. In this sense, the objective of this study was to carry out surveillance action in municipalities considered endemic for Schistosomiasis in the state of Pará, to assess the current situation of the disease in this region studied. This work was carried out by the Laboratory of Intestinal Parasitosis, Schistosomiasis and other Helminths of the Evandro Chagas Institute, Regional Reference for Schistosomiasis, with the support of the selected municipalities and the 4th Regional Health Center of Sespa, and took place from May 13 to 28, 2024, in which 418 stool samples were collected from individuals residing in the municipalities of Bragança (223/418) and Quatipuru (195/418), selected because they are considered areas of active transmission of the disease, to perform the parasitological diagnosis of stool using the Kato-Katz method. This test was performed in duplicate, and children from 2 years of age, adolescents, adults and the elderly were included. The positivity rate for Schistosomiasis was 9.1% (38/418) and 9.3% (39/418) for other helminths. Among the positive patients in the municipalities studied, 31.6% (12/38) had a medium to high parasite load, with a low parasite load predominating at 68.4% (26/38). Taking into account the total number of positive cases found with *Schistosoma mansoni* and other helminths in the two areas studied, the coinfection rate was 17.3% (13/75), with *Schistosoma mansoni* and Hookworm spp. being the most common coinfection, with a rate of 10.7% (8/75). However, the results indicate a significant positivity rate for Schistosomiasis in the studied areas of Pará, which is not the rate recommended by the Ministry of Health. In addition, the presence of coinfections and the variation in the parasite load reinforce the need for continuous and integrated interventions to control the transmission of the disease. Active surveillance, combined with health education, more accurate diagnosis and appropriate treatment, is crucial to reduce the prevalence of schistosomiasis and improve public health in endemic areas of Pará. The neglected disease status is reinforced by limited research and by the fact that it is recorded in areas of greater social vulnerability. With a view to elimination, there is a clear challenge to the sustainability of actions in view of the possibility of the disease reoccurring. It is essential to assess and monitor data in information systems to ensure the completeness and consistency of hospitalization and death records. These perspectives are of significant relevance considering the 2030 target of eliminating schistosomiasis as a public health problem proposed by the World Health Organization to achieve the Sustainable Development Goals.

KEYWORDS

Schistosomiasis; Surveillance Action; State of Pará; Amazon-Brazil

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