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TITLE
CORRELATION BETWEEN EGG COUNT IN FECES AND SCHISTOSOMIASIS PROGRESSION
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ABSTRACT
Objectives: To analyze the relationship between the number of schistosome eggs in the feces of infected individuals and the clinical progression of the disease.
Methodology/Development: The analysis involved cross-referencing the number of people diagnosed with schistosomiasis based on the quantitative number of eggs found in their feces with the progression of the disease. Data was sourced from the DATASUS website, using the TabNet platform with the following filters: "Diseases of Notification - 2007 onwards (SINAN)"; "Schistosomiasis"; "Brazil by region, UF, and municipality"; rows categorized by "evolution"; columns categorized by "quantitative analysis"; and the period from 2014 to 2023. The most recent 10 years were selected to ensure the analysis was up-to-date.
Results: For cases diagnosed with zero eggs, out of a total of 20,607 cases, 8,008 had the disease progression field left blank or ignored; 11,265 reported a cure; 387 reported no cure; 618 resulted in death due to schistosomiasis; and 329 resulted in death from other causes. For cases diagnosed with one or more eggs in the feces, out of 19,533 cases, 6,273 had the progression field left blank or ignored; 12,835 reported a cure; 235 reported no cure; 136 resulted in death due to schistosomiasis; and 54 resulted in death from other causes.
Conclusion: The data reveals that 35.57% of the 40,140 cases had incomplete or ignored information. This suggests either the use of alternative diagnostic tests beyond fecal parasitology or shortcomings in the healthcare system's data recording. The cure rates were similar regardless of the presence of eggs, as were the non-cure rates, indicating a weak correlation between egg count and disease severity. However, the mortality rate from schistosomiasis in cases with no eggs was 4.5 times higher than in cases with eggs, suggesting greater disease severity in those with negative fecal parasitological exams between 2014 and 2023. Additionally, the mortality rate from other causes was about six times higher in the absence of eggs compared to their presence, further supporting the increased severity in individuals with negative fecal parasitology results. Therefore, expanding diagnostic tests for patients with no eggs found in their feces is crucial for improving health outcomes.
KEYWORDS
Schistosomiasis; Progression; Eggs; Quantity.
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