

Intestinal Parasites in Children from Middle Income Families

Intestinal parasites are amongst the most common infestations in the world, more so in developing countries. Though prevalent in malnourished children, infestation can occur in children with normal nutrition also -because of poor personal hygiene and environmental sanitation. We studied the pattern of infestation in children from middle and higher income group families in and around Kumbakonam, Tamil Nadu. Freshly passed stools were collected from 342 children (233 boys, 109 girls), attending the private consultation rooms for gastrointestinal symptoms during January 1988 to April 1991. The samples were examined by simple sedimentation method(1). Seventy two per cent of the children were from urban and 28% were from villages; 77.8% were from middle income and remaining from higher income group. Ninety six children were less than 1 year of age, 141 between 1-5 years and 105 over 5 years. Two hundred and fifty one (73.4%) stool samples, had parasites. The most prevalent parasite was *A. lumbricoides* in 71 (20.8%), followed by *E. histolytica* in 52 (15.2%), *E. vermicularis* in 48 (14%), hookworm in 39 (11.4%), *G. lamblia* in 14 (4.1%), *T. solium* in 2 (0.6%), *H. nana* in 4 (1.2%) and mixed infestations in 21 (6.1%). Ninety one (26.6%) stool specimens did not reveal parasites.

Amebiasis and giardiasis were seen

mostly in older children. Amebiasis was seen in 3 children who were <6 months and in 11 children between 6-12 months, while giardiasis was observed in 2 and 3 children, respectively. The earliest age of *Ascaris* infestation was 3 months.

Seventy three per cent of children harbored intestinal parasites, which is comparable to the study of Subbannayya *et al.* (2) but higher than an earlier report(3). This is contrary to the common belief that only children from poor income families harbor parasites. Our results suggest that intestinal parasites are prevalent in children from urban areas and among better socio-economic strata also. Health education and deworming with broad spectrum drugs are essential in this context.

**N. Ganga,
R. Ravichandran,**
39, John Selvaraj Nagar,
Kumbakonam 612 001,
Tamil Nadu.

REFERENCES

1. Sood R. Stool examination. *In: Medical Laboratory Technology (Methods and Interpretations)*, 1 edn. New Delhi, Jaypee Brothers, pp 1985,142-146.
2. Subbannayya K, Kumar A, Rao KNA, Shivananda PC. Parasitic infestations in primary school children. *Indian Pediatr* 1984, 21: 479-483.
3. Dutta KK, Sharma RS, Goswami RN, Mishra RK. Prevalence of intestinal parasites in urban area of Alwar, Rajasthan. *J Comm Dis* 1981, 13: 194-199.