Controlling Disease due to Helminth Infections

Edited by DWT Crompton, A Montressor, MC Nesheim and L Savioli. Pp. xv + 248. Sw. fr. 35/US \$31.50. WHO. 2003. ISBN 92-4-156239-0. (Available from SAMA-HMPG. Price R240, members R170.)

This should be a handbook for health professionals and administrators who are working in child, women's, school, public and environmental health. For specialists in education, it explains how worm infestation can impair learning, and why the school system is a key to implementation of control. It is school-age children and young women who carry the greatest burden of morbidity and disease due to infestation by parasitic worms. The planning, implementation, management and monitoring of control and prevention are described. That success is feasible has been proved by Japan and Korea, and other countries are making substantial progress.

This book is also about World Health Assembly resolution

54.19 of May 2001, which South Africa supported. It calls on member states to control soil-transmitted helminthiasis and schistosomiasis. One target is that there should be regular deworming of at least 75% of school-age children by 2010 because this is the quickest way to counter morbidity and improve learning. School-based treatment frequency should be determined by the degree of exposure to infection through lack of sanitation. However, South Africa still has no national control programme or achievable policy. Red tape and bureaucracy are frustrating attempts to initiate control. Strictly speaking, school-based, mass deworming may be illegal. The same goes for buying anthelminthics for as little as 11 cents a dose offshore, as advocated by WHO. One of the anthelminthics of choice, which is completely safe, is a schedule 4 medicine. This may be more profitable but blocks lawful use for non-selective deworming. It is fundamental that the main-line anthelminthics are safe for use in young children and after the first trimester of pregnancy but this is not in the package inserts. This disinformation by the pharmaceutical industry has a strong negative influence on paramedics and lay people who have to implement deworming.

Unfortunately there are serious typographical errors in the first edition, especially in some tables and figures. There also appears to be a conflict of interest in favour of albendazole in the chapter on anthelminthics, by John Horton.

John Fincham