

Technical updates of the guidelines on Integrated Management of Childhood Illness (IMCI)

Evidence and
recommendations for further
adaptations



**World Health
Organization**

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Helminth infestations

Management of helminth infestations in children below 24 months

TECHNICAL BASIS

Data from studies in Africa, Asia and Latin America, that included children below the age of two years, was provided to an informal consultation (1). Albendazole was the drug chosen for the treatment in eight studies and mebendazole in two studies. In a recent study in Tanzania with children aged 6 to 59 months (212 were less than 24 months), mebendazole was the drug of treatment and parasitological, nutritional and cognitive variables were assessed. Mebendazole had a positive effect on motor and language development and comparison between the treated and placebo groups revealed no difference in the occurrence of adverse effects (fever, cough, diarrhoea, dysentery and acute respiratory illness) one week after intervention.

A recent consultation addressing the use of albendazole/mebendazole in children under 24 months stated that there was paucity of safety data regarding the use of these drugs in infants under 12 months.

A 500 mg dose of mebendazole is recommended for all children with anaemia age 12 months or older who live in an area with hookworm (*Ancylostoma* and *Necator*) or whipworm (*Trichuris*) and who have not been treated with mebendazole in the last six months. Mebendazole is also a very effective treatment of infection by roundworm (*Ascaris*), which contributes to malnutrition. Mebendazole is given without microscopic examination of the stool. As a general rule, these infections are transmitted in all tropical and sub-tropical areas. However, for infants below 12 months, such cases should be referred and managed on a case-by-case basis.

As a consequence of (i) the great distribution of the parasites; (ii) the safety of the drug; (iii) the low cost of the treatment (<0.017\$ for one dose of mebendazole or albendazole); (iv) the relative high cost of diagnosis (need of microscope, lab material and training) in endemic areas, children who have not been dewormed in the previous six months should be offered deworming irrespective of the possibility of confirming their infectious status (2).

Albendazole and mebendazole can be safely used in children 12 months or older.

HELMINTH INFESTATIONS
in children below 24 months

- Albendazole and mebendazole can be safely used in children 12 months or older.

SUMMARY
RECOMMENDATION

References for helminth infestations

1. *Report of the WHO Informal Consultation on the use of praziquantel during pregnancy/lactation and albendazole/mebendazole in children under 24 months.* Geneva World Health Organization, 8-9 April, 2002. (WHO/CDS/CPE/PVC/2002.4).
2. Montresor A, Awasthi S. Crompton DWT(2003). Use of benzimidazoles in children younger than 24 months for the treatment of soil-transmitted helminthiasis. *Acta Tropica*, 86:223-232.