

Phramongkutklao College of Medicine Phramongkutklao Hospital



A Follow-up Study of *Opisthorchis viverrini* Infection after the 10-year Implementation of Control Program in Baan Nayao, Chachoengsao, Central Thailand



5th Year Medical Student 12 December 2013



Introduction

OV infection

Cholangio carcinoma

In 2002

Incidence rate: 21.6/100

person-years

Prevalence: 21.3%

(Rangsin, 2009)

Prevention and control

- Case diagnosis and treatment
- Health education and promotion for consumption of cooked fish
- Promotion of using toilet

In 2007

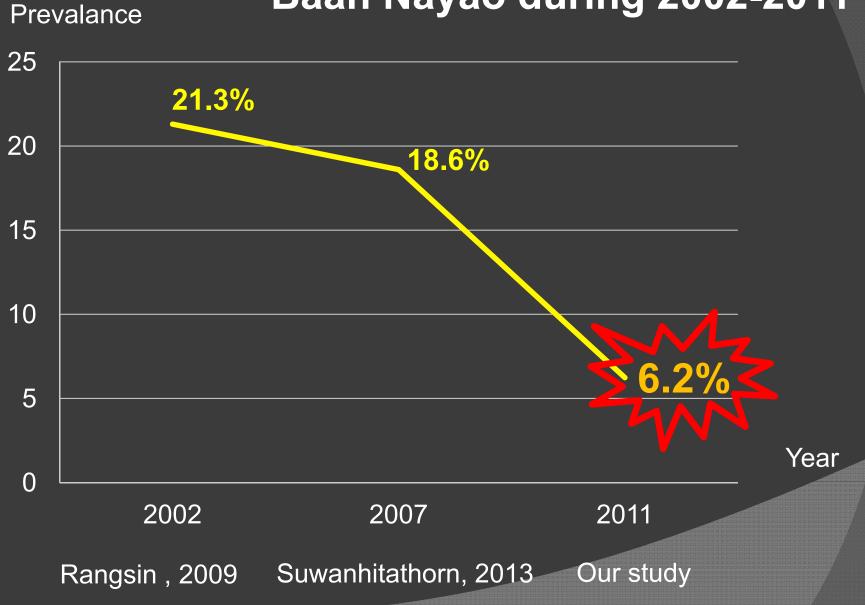
Incidence: 21.4/100

person-years

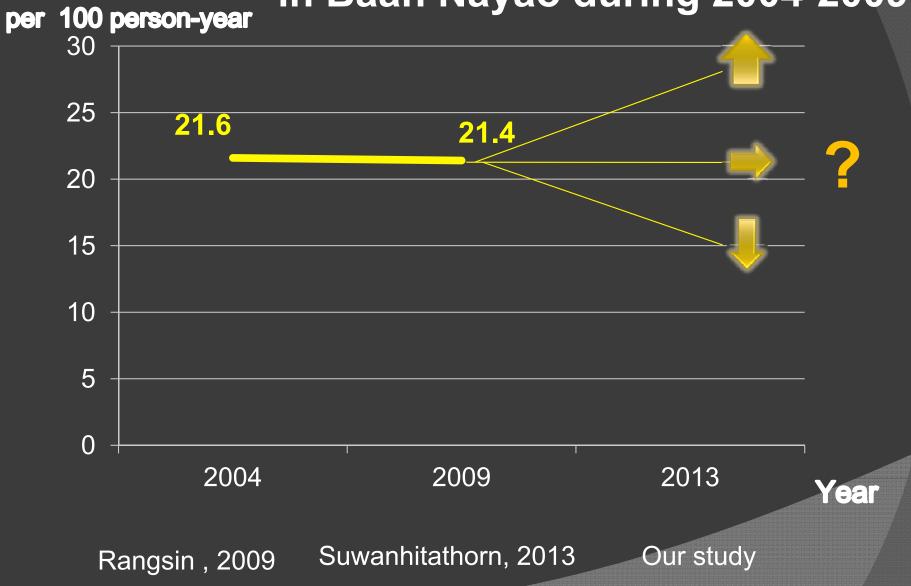
Prevalence: 18.6%

(Suwanhitathorn, 2013)

Prevalence of OV infection in Baan Nayao during 2002-2011



Incidence rate of OV infection in Baan Nayao during 2004-2009



Objective

 To determine the incidence and risk factors of OV infection in Moo 15, Baan NaYao, Chachoengsao, 2011 after 10 years follow up

Materials and Methods

- Study design: Mixed method study
 - Quantitative study
 - Qualitative study
- Population: Villagers who were received negative finding of OV egg in stool specimen with a microscope, in 2011.

Quantitative study

September 2011

Negative case for OV infection 974 case

3 death cases died from...

2 cases 1 case cancermissing

Loss to follow up due to...

1.Moved out(292) 29.9 %

2.Dead(3) 0.4 %

3.Unable to contact (187) 19.2 %

Total (482) 49.5 %

Stool samples

Stool examination

Negative case 492 case

Response rate 50.5 %

Questionnaire

- Direct simple smear
- Kato thick technique
- Concentration technique

- Demographic data
- Health behavior and OV infection

Qualitative study

Age groups

- Secondary school
- 20-29 years old
- 30-49 years old
- 50-59 years old
- > 60 years old

Characteristic

Perceptions of transmission

Awareness

Perceptions of treatment and prevention

Perceptions of health education and promotion

Recorded information



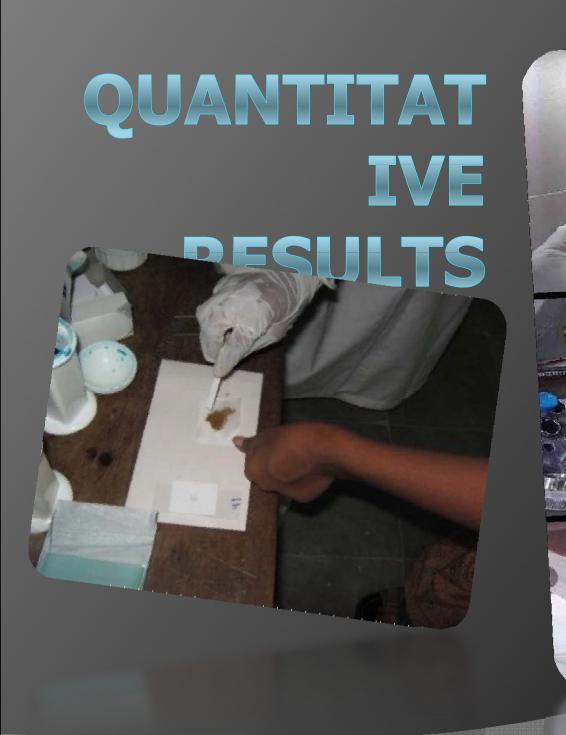
Text



Sorting & Coding



Content analysis (Grounded Theory)

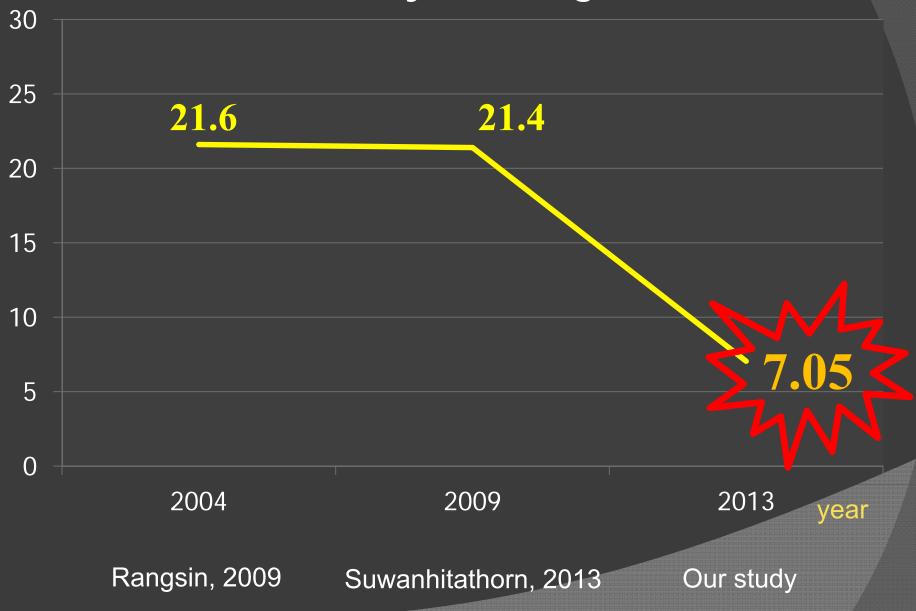




Demographic data (N = 492)

- Male 46%
- Primary school 66.7%
- Agriculture 63.7%
- Age range 1-85 years old
 - Mean 47.4 ± 18.9 years old

Incidence rate of OV infection in per100 person-year Baan Nayao during 2004-2013



Factors associated OV infection among Baan Nayao villagers

Characteristic	No. infected	Person-years of follow-up	IR /100 person- years	Crude IRR (95% CI)	Р	Adjusted IRR (95% CI)	Р
Sex							
Female	19	238.8	7.9	1			
Male	21	205.0	10.2	1.2 (0.7-2.4)	0.420		
Age group (yrs.)							
0-19	4	55.0	7.2	1			
20-39	1	52.3	2.0	0.3 (0.3-2.4)	0.240		
40-59							
≥60	Koi-p	la	Adiu	sted IR	R		
Educational level	TO: P						
Higher than primary	J	00.0	7.0	i			
school					7		
Primary school or below				4			
Family income	No						
(Thai Baht/year)							
>40000	10	1425	7.0	1			
0-40000							
Fish menus	Yes			2.4			
Chopped raw fish salad							
(Koipla)							
No	12	235.0	5.1	1		1	
Yes	28	207.5	13.5	2.6 (1.4-5.1)	0.004	2.4 (1.1-4.9)	0.02
Raw fermented fish							
(Pla ra)							
No	12	140.0	8.6	1			
Yes	27	301.3	9.0	1.0 (0.5-2.1)	0.920		

QUALITATIV E RESULTS





Reduced raw fish consumption

"They(young generation) never eat raw fish, they are used to eat fried

Part	"I know that eating raw fish such as Koi-pla and Larb pla can cause OV
Situation of Raw Fish Consumption	- Ne infection." - PCM's hear notion - Awareness of infection
Perception of Transmission	- Most villagers known how OV was transmitted. "Fresh water fish(Cyprinoid fish) has
Awareness of Infection	- Mo and before. And after receiving the treatment from Phramongkutklao's
Perception of Treatment and Prevention	"We used to see the parasites from doctor, then we were afraid to eat it."
Perception of Health Education and Promotion	- Health education and promotion were from PCM.

Discussion

- Reduction of incidence of OV infection
 - Health education
 - Promotion for consumption of cooked fish
 - Promotion of using toilet
- Awareness in health risk from eating koi-pla
- New generation preferred cooked food
- Raw fish consumption is an important risk factor for OV infection

Conclusion

- Incidence of OV infection decreased
 - Phramongkutklao's health promotion
 - Health education
 - Repeated stool examination
- Further action
 - OV knowledge for students and villagers

Recommendation

- Implementation
 - Ministry of Public Health
 - Standard knowledge of OV infection to basic education especially in Northeast and North.
- Targeted strategy is preferred
- So we should provide...
 - Education
 - Health promotion



Acknowledgements

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