STUDY ON RESIDUAL MORBIDITY FROM SCHISTOSOMIASIS BY MEANS OF ULTRASONOGRAPHY IN THE MUNICIPALITY OF BANANAL, SÃO PAULO, BRAZIL

This study was developed in the municipality of Bananal, São Paulo, an endemic area for schistosomiasis with prevalence of less than 10% and low parasite load among infected individuals. The objective was to identify the clinical forms of intestinal schistosomiasis among 109 patients who had been diagnosed through parasitological tests and medicated with oxamniquine at the time of the Plan for Intensification of Schistosomiasis Control Actions (1998-2000). Abdominal ultrasonography and feces examination (Kato-Katz) were utilized: this was on average done four years after the ending of the plan. In this sample, five patients were identified whose abdominal ultrasound images were compatible with peripheral and central periportal fibrosis and portal hypertension who had had a clinical diagnosis of schistosomiasis in its intestinal form. Ultrasonography is a sensitive noninvasive diagnostic method that enables identification of the extent of liver involvement in schistosomiasis cases better than through its expression in physical examination. Even considering that there was a low prevalence of liver abnormalities and portal circulation in this sample, the importance of utilizing the ultrasound method for individual evaluations on the schistosomiasis patients was demonstrated. Through this, it was possible to detect morphological and functional alterations that could have important clinical consequences. It also should be noted that, at the time of the ultrasound examination, all the patients presented negative coproscopic test results, thus showing the effectiveness of the control actions over the medium term. It needs to be borne in mind that, because the ultrasound study was carried out on average four years after the specific treatment of this population, it is likely that fewer abnormalities were detected than there would have been if this study had been performed at the time of the parasitological diagnosis. This comes from the knowledge that involution occurs following specific treatment, even if only partially with regard to fibrosis and its consequent functional alterations. Finally, despite the small number of cases evaluated, the strategy utilized in the present study has started to fill the gap regarding assessing the impact of schistosomiasis on the health of the citizens of Bananal that was perceived during the development of the Plan for Intensification of Schistosomiasis Control Actions between 1998 and 2000.

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