

The intestinal parasite infection status of inhabitants in the Roxas city, the Philippines

Bong-Jin KIM¹⁾, Mee-Sun OCK¹⁾, Dong-Il CHUNG²⁾, Tai-Soon YONG³⁾ and Kyu-Jae LEE^{4)*}

¹⁾Department of Parasitology, Kosin Medical College, Busan 602-703, ²⁾Department of Parasitology, Kyungpook National University School of Medicine, Daegu 700-422, ³⁾Department of Parasitology and Institute of Tropical Medicine, Yonsei University College of Medicine, Seoul 120-752, ⁴⁾Department of Parasitology and IFBB, Yonsei University Wonju College of Medicine, Wonju 220-701, Korea

Abstract: We carried out a small-scale survey to investigate the status of intestinal protozoa and helminthes infection of inhabitants in Roxas city, Mindoro, the Philippines. Total 301 stool samples were subjected to the formalin-ether concentration method for the detection of helminth ova and protozoan cysts. The overall positive rate was 64.5%, and that of male and female were 56.6% and 72.5%, respectively. The highest infected helminth was *Ascaris lumbricoudes* (51.2%), followed by *Trichuris trichiura* (27.6%), hookworm (8.0%) and *Enterobius vermicularis* (0.3%). The protozoa infection status revealed that *Entamoeba coli* was the most frequent (15.0%). *Indoamoeba buetschlii* and *E. histolytica* were found but few. The multiple infection more than two parasites was 29.6%, and double infection with *A. lumbricoides* and *T. trichiura* was most common. The intestinal helminth infections were highly prevalent in this area, according to this result, and we concluded that anthelminthic drugs should be given to inhabitants, especially to children of 1 to 15 years-old.

Key words: infection rate, protozoa, helminths, Philippines

The Philippines is composed of three big islands (Luzon, Visayas and Mindanao) and many other small islands. The Roxas city where we surveyed lies in Mindoro island, below the Luzon, and is four times as large as Jeju island. The central mountainous ridge divides the island into east and west. East and west region are called oriental and occidental Mindoro, respectively. The Roxas city is located in east Mindoro. The Philippines has been well-known as an endemic area of malaria, schistosomiasis, capillariasis, filariasis and intestinal helminthiasis (Carney et al., 1981a, 1981b; Cross, 1992; Mcgarvey et al., 1996;

Belizario et al., 1997; Kron et al., 2000).

In March 2002, we performed a small-scale survey to investigate the intestinal helminth and protozoan infection among the inhabitants of Roxas city, and formalin-ether concentration method was used to detect protozoa cysts and helminth ova.

The number of examinees was 301, and infection rate was 64.5% for helminths and protozoa. Among the positives, female showed higher positive rate (72.5%) than that of male (56.6%). The most common infected parasite was *Ascaris lumbricoides* (51.2%), followed by *Trichuris trichiura* (27.6%), hookworm (8.0%), and *Enterobius vermicularis* (0.3%). Intestinal protozoa infection rate was very low, except infection with *Entamoeba coli* (15.0%). *Entamoeba histolytica* and

[•] Received 9 December 2002, accepted after revision 3 March 2003.

 $[\]hbox{*Corresponding author (e-mail: kjlee@wonju.yonsei.ac.kr)}\\$

I. buetschlii

| Parasites | No. positive (%) | | | | | | |
|-----------------|------------------|-----------|-----------|-----------|-----------|-----------|------------|
| | Age | | | | Sex | | |
| | 1-5 | 6-10 | 11-15 | 16- | male | female | — Total |
| A. lumbricoides | 19 (52.8) | 76 (56.7) | 49 (53.3) | 10 (25.6) | 67 (44.1) | 87 (58.4) | 154 (51.2) |
| T. trichiura | 6 (16.7) | 41 (30.6) | 30 (32.6) | 6 (4.5) | 32 (21.1) | 51 (34.2) | 83 (27.6) |
| Hookworm | 5 (13.9) | 8 (6.0) | 5 (5.4) | 6 (15.4) | 10 (6.6) | 14 (9.4) | 24 (8.0) |
| E. vermicularis | - | - | - | 1 (2.6) | - | 1 (0.7) | 1 (0.3) |
| E. coli | 5 (13.9) | 24 (17.9) | 9 (9.8) | 7 (18.0) | 21 (13.9) | 24 (16.1) | 45 (15.0) |
| E. histolytica | - | - | 1 (1.1) | - | - | 1 (0.7) | 1 (0.3) |

1 (1.1)

1(0.7)

Table 1. Prevalence of intestinal parasite infection among the inhabitants in the Roxas city, Mindoro, the Philippines

Iodoamoeba buetschlii were identified in about 1% of the samples. Multiple infection was also frequent in intestinal helminths. Among the multiple infection, A. lumbricoides and T. trichiura double infection was the most common (79.2%) of all the multiple infection. The age group of 1 to 15 years was the greatest number (87%) of the total examinees. The intestinal helminth infection rate of these school age children was considerably high. Intestinal helminths such as A. lumbricoides showed 54.3% positive rate (Table 1). It is obvious that high infection rate of A. lumbricoides would affect the growth of children, thus necessitating the medication and education against parasite infection. According to earlier studies on intestinal parasite infection in the Philippines (Cabrera, 1984; Oberst et al., 1987; Lee et al., 2000), the soil-transmitted intestinal helminths such as A. lumbricoides, hookworm, and T. trichiura show more than 30% high infection rates. The present study also revealed similar results. In the case of A. lumbricoides, 51.7% infection rate was higher than that of rural area (Yamamoto et al., 2000). Carney et al. (1981a, 1981b) reported that Mindanao and Mindoro had schistosomiasis egg positive rates of 16% and 20%, respectively. Trematodes and cestodes, however, were not detected in the present study, and the snail (Onchomelania quadrasi) is considered to be the habitat.

In summary, the intestinal helminth infection rate of school children of the Roxas city was considerably high and they require special attention to protect them from the parasitic diseases. Since this area is prevalent in intestinal helminthes, mass treatment through wide-spectrum helminthics should be carried out.

2 (1:3)

2(0.7)

REFERENCES

Belizario VY, Saul A, Bustos MD, et al. (1997) Field epidemiological studies on malaria in a low endemic area in the Philippines. *Acta Trop* **63:** 241-256.

Cabrera BD (1984) Reinfection and infection rates of ascariasis in relation to seasonal variation in the Philippines. *Southeast Asian J Trop Med Public Health* **15**: 394-401.

Carney WP, Banzon T, de Veyra V, Papasin MC, Cross JH (1981a) Intestinal parasites of man in Oriental Mindoro, Philippines, with emphasis on schistosomiasis. *Southeast Asian J Trop Med Public Health* **12**: 12-18.

Carney WP, de Veyra VU, Cala EM, Cross JH (1981b) Intestinal parasites of man in Bukidnon, Philippines, with emphasis on schistosomiasis. *Southeast Asian J Trop Med Public Health* 12: 24-29.

Cross JH (1992) Intestinal capillariasis. *Clin Microbiol Rev* 5: 120-129.

Kron M, Walker E, Hernandez L, Torres E, Libranda-Ramire B (2000) Lymphatic filariasis in the Philippines. *Parasitol Today* **16**: 329-333.

Lee KJ, Ahn YK, Yong TS (2000) A small-scale survey of intestinal parasite infections among children and adolescents in Legaspi city, the Philippines. *Korean J Parasitol* 38: 183-185.

Mcgarvey ST, Aligui G, Graham KK, Peters P, Olds GR, Olveda R (1996) Schisotosomiasis japonica and childhood nutritional status in northeastern Leyte, the Philippine. *Am J Trop Med Hyg* **54**: 498-502.

Oberst RB, Alquiza LM (1987) Survey of intestinal parasite on Palawan, Philippines. Southeast Asian J Trop Med Public Health 18: 197-201.

Yamamoto R, Nagai N, Kawabata M, Leon WU, Ninomiya R, Koizumi N (2000) Effect of intestinal helminthiasis on

nutritional status of schoolchildren. Southeast Asian J Trop Med Public Health 31: 755-761.