



# **Rapid Assessment on Intake of De-worming Tablets By Pregnant Women in Chhattisgarh**

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## **Rapid assessment on intake of de-worming tablets by pregnant women in Chhattisgarh**

### **BACKGROUND**

The common cause of anemia in the world is hookworm infestation. More than 50 % of pregnant women are affected by anemia. Anemia is an important health problem in the country especially in pregnant women. Distribution of IFA tablets under the anemia control programme has not been successful in reaching the expected goals. Hence it is necessary to focus attention on the associated reasons of anemia, in order to decrease the problem of anemia. WHO has suggested in the guidelines of Human Helminthiasis in preventive chemotherapy that no congenital abnormalities occur in the baby if Mebendazole or Albendazole is used during pregnancy.

### **Protocol for deworming during pregnancy**

1. Albendazole is the recommended drug of choice for deworming of pregnant women
2. De-worming should be done after the 1<sup>st</sup> trimester of pregnancy (preferably during the 2<sup>nd</sup> trimester).
3. A single dose of 400 mg of albendazole is recommended

### **DATA & METHODS**

**Study design:** Cross sectional

**Study area:** District 3 (Rajnandgaon, Ambikapur, Bilaspur)

Block: 6 (Chhuikhadan, Pendra, Balod, Lundra, Udaipur, Bilaspur)

Health facilities: 10 (PHC-1, CHC-6, DH-3)

**Study Population: Caregivers:** (Staff nurses-8, ANM-3, MO-2, RMA-3, Nursing sister-1)

**Beneficiaries:** Total 55 pregnant women

**Sample selection:** health facilities were selected conveniently, for beneficiaries purposive method was used.

**Data collection tool:** Semi-structured questionnaire

**Study duration – Feb 2016 – May 2016**

### **FINDINGS:**

Since different questionnaires were used for caregivers, Mitans and beneficiaries, the following findings are under different headings.

#### **Caregivers:**

A total of 17 caregivers (staff nurses:8, ANM:3, MO:2, RMA:3, Nursing sister:1) were interviewed.

#### **Status of de-worming training of caregivers (N=17)**

<b>Interviewee</b>	<b>Yes</b>	<b>No</b>
Staff Nurse	4	4
ANM	2	1
RMA	2	1
MO	0	2
Nursing Sister	1	0
Total	11	8

- The above table shows that among 17 care givers who were interviewed, only 11 were trained on albendazole.

**Issues covered by caregivers on de-worming counseling to pregnant women**

Issues covered in counseling	Staff nurse (8)	MO(2)	ANM (3)	RMA (3)	Nursing sister
Benefits of deworming	2	0	1	3	0
Side effect	0	0	0	1	0
Keep the nails trimmed	0	0	0	1	0
Wear footwear	0	0	0	1	0
Keep the environment clean	0	0	0	1	0
Wash the vegetables before eating or cooking	0	0	0	1	0
Use sanitary toilets	0	0	0	2	0
Wash hands with soap after defecation	0	0	0	3	0
Wash hands with soap before eating food	0	0	1	1	0

- Caregivers are not covering all the related issues in counseling to pregnant women before giving de-worming tablets.
- Albendazole tablet is not given on routine basis. It is prescribed to the pregnant women who have complaints like low hemoglobin.

**Verification of the stock of albendazole tablets (In month of May)**

Name of the facility	Available stock
DH Bilaspur	4200 tablets in march as entered in the register, store not checked
CHC Udaipur	5000 tablets available in store
DH Ambikapur	Received 2000 tablets on 6/5/16 and 380 tablets are left
PHC Lakhram, Bilaspur	Direct supply is not coming to the PHC, take from the field staff

***Mitanins:***

A total of 19 Mitanins were interviewed in the health facilities and in the villages.

- Out of 19 Mitanins, 17 are trained to give albendazole to children, not to pregnant women.
- None of the Mitanin is trained on giving it to pregnant woman.
- Out of 19 Mitanins, 6 said that during their home visits they check the compliance of de-worming treatment to children.
- Since Mitanins don't give albendazole tablets to pregnant women but they do cover few basic issues in their health education part during field visits like:
  - To clean hands, about health hygiene and to cover food
  - To keep utensils clean and to wash hands
  - To avoid eating soil

***Beneficiaries:***

As per de-worming operational guideline all the pregnant woman should be given de-worming tablet after their first trimester. In this study 55 pregnant women who crossed their first trimester were interviewed.

- Out of 55 pregnant women 8 had taken de-worming tablet.

- Out of 8 pregnant women 7 got the de-worming tablet free form government health facility and 1 from private centre.

## **CONCLUSION**

Most Caregivers are not oriented about the revised guidelines of de-worming programme. De-worming tablets are not prescribed by doctors routinely. Knowledge of Mitanins and nurses regarding cause of hookworm infestation is needed to be improved. The general points to be included in health education for prevention of deworming are not discussed in counseling.

## **RECOMMENDATIONS:**

- Orientation of caregivers on de-worming programme in MCH context.
- Ensure availability of de-worming tablets.