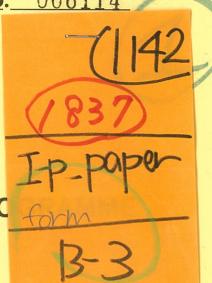
Reg. No. 006114

FIJI **FILARIASIS**

MASS DRUGS ADMINISTRATION PRO 2002



Village/Sett/Station:	Population:
Municipality(City/Town):	Nursing Zone:
Medical Area:	
Sub-Division:	
Division:	

* For Official use only	
Total Population Registered	
Total Population Treated ·	
Total Number of Tablets given (DEC)	
Total Number of Tablets given (Alb)	







PacELF HQ, Suva, Fiji

Important Information for Filariasis Treatment and Drugs

Diethylcarbamazine



Albendazole



Excluded population

*Under 2 years old

*Pregnant woman

*Severe sick people

*Very old and frail people

Do you know your body weight?

YES



Dosing guide 'A'

Body weight (Kg)	Number of tablets							
(3/	DEC	Alb.						
10-13	1	1						
14-22	2	1						
23-29	3	1						
30-38	4	1						
39-46	5	1						
47-52	6	1						
53-63	7	1						
64-71	8	1						
72-79	9	1						
80+	10	1						

NO



Dosing guide '

Age	Numb tabl				
	DEC	Alb.			
2-4	2	1			
5-9	3	1			
10-14	5	1			
15-19	7 1				
20-49	9	1			
50+	8	. 1			

IMPORTANT INFORMATION for FILARIASIS MASS DRUG ADMINISTRATION (MDA)

- 1. Explain about MDA treatment to public.
- 2. Fill out the registration book accurately.
- 3. If not sure about exact age, write the approximate age (eg. 30+, 40+ etc.).
- 4. Advice that both medications should be taken at the same time on MDA date.
- 5. Ensure that advice is given for absentees to visit the nearest H/C or drug distribution booth.
- 6. Submit registration book to subdivision when completed.
- 7. Severe Adverse Reactions if experienced by an individual, contact the nearest medical personnel (nurse/doctor).

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DETAILS of MASS DRUG ADMINISTRATION Diethylcarbamazine and Albendazole

- on the dosing guide of 6mg/kg. The maximum number of tablets that can be given to any individual is 10 Diethylcarbamazine (DEC) is supplied in 50mg tablets. The number of tablets given to an individual is based
- Albendazole is supplied in 400mg tablets. Only one tablet is given to all regardless of age and weight. 7
- Explaining about MDA: 2002 is the first year for mass drug administration for Fiji. All persons from the age This will be an annual event for the next 5 years. The drugs that are being used here serves two purposes: groups of 2 years old to the elderly will be given the 2 drugs (except those that are contraindicated).
 - a) Kills the filarial worms
- b) Also kills hookworms
- Filling out of Registration Books: It is important that the books are filled out accurately. For example: (refer to mock treatment form). 4
- Who do you register? Everyone in the household / village / office / street who is present at the time of MDA regardless of whether or not they take the drugs.
- Name: to include Father's name only for the Indo-Fijian individuals.
- Sex and Age: must be filled out. If the individual does not know their age, please write the approximate age under the age column.
- Weight: this column is optional. if the individual has an idea of their body weight, please use dosing guide A. If age is given and the individual does not know their body weight please use dosing guide B.
- If an individual knows both their age and weight, please use dosing guide A. (i.e. dosing based on body

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- *Very old and frail people

Do you know your body weight?



YES

Dosing guide 'A'

Body weight (Kg)	Number of tablets							
(119)	DEC	Alb.						
10-13	1	1						
14-22	2	1						
23-29	3	1						
30-38	4	1						
39-46	5	1						
47-52	6	1						
53-63	7	1						
64-71	8	1						
72-79	.9	1						
80+	10	1						

NO



Dosing guide 'B

Age	Numb table					
	DEC	Alb.				
2-4	2	1				
5-9	3	1				
10-14	5 1					
15-19	7 1					
20-49	9	1				
50+	8	1				

- Before moving onto the treated and not treated columns, first establish if they qualify to be treated (i.e. not part of the **excluded population**: pregnant, sick). If they qualify than write in the number of tablets they require. Otherwise, do not fill in under the DEC and Albendazole columns, if the individual is not treated.
- Furthermore, if they are treated please encourage individuals to take tablets in your presence immediately. Then you must tick **column "1"**. If however, they wish to take tablets later, tick **column "2"**.
- At the end of each sheet, please write in the total numbers under the male (M), female (F), DEC, Alb,(1),(2), pregnant, sick, infant, old, refuse.
- 5. For those individuals that are absent from their homes, office etc., please advice family, work-mates, neighbours etc. to encourage the absent individual to go the nearest health centre/booth/hospital for treatment.
- 6. Upon completion of MDA in your assigned area, please return the booklets to your nearest Subdivisional Medical Office.
- 7. Severe Adverse Drug Reactions: DEC and Albendazole are both safe and well-tolerated drugs. However, in take of these drugs can lead to adverse reactions that occur almost exclusively in infected individuals since they result from death of the parasite after treatment. These reactions are usually self-limited and resolve without any action, although symptomatic treatment with paracetamol/ panadol is helpful. There are two groups of adverse reactions, general and local.
 - General reactions, decreasing order of frequency, are: headache, body ache, fever, dizziness, decreased appetite, malaise, nausea, urticaria, vomiting and sometimes bronchial asthma. General reactions and fever are positively associated with the prevalence and intensity of microfilaraemia. Reactions occur early during the treatment and generally do not last more than 3 days.
 - Local reactions are most commonly scrotal nodules due to death of the adult worm.
 - Advise the community to avoid taking the drugs on an empty stomach and forewarn that some adverse reactions will be encountered in some individuals, particularly those who have the infection and therefore need treatment. Inform the community and their leaders of places where patients can get help for adverse reactions if needed.

Examples of how to fill out Registration Book

Individuals:

- 1. Rt Lui, weighs 67kg and aged 40, agrees to be treated, and takes 2 tablets.
 - 2. Deo, not sure about age, but weighs 50kg, takes tablets immediately.
- 3. Finau, does not know her weight but aged 52, will take medicine later.
 - 4. Licy, 60kg and aged 25, pregnant.

If weight and age known - Dosing Guide A

If age unknown - Dosing Guide A

If age known and weight unknown - Dosing Guide B

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	(full name)	٤	-												
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1: taken	
• •	
House	•

2: taken later

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Diethylcarbamazine



Albendazole



Excluded population

- *Under 2 years old
- *Pregnant woman
- *Severe sick people

*Very old and frail people

Do you know your body weight?

YES



Dosing guide 'A'

Body weight (Kg)	Number of tablets						
(1.49)	DEC	Alb.					
10-13	1	1					
14-22	2	1					
23-29	3	1					
30-38	4	1					
39-46	5	1					
47-52	6	1					
53-63	7	1					
64-71	8	1					
72-79	9	1					
80+	10	1					

NO



Dosing guide '

Age	Numb tabl							
	DEC	Alb.						
2-4	2	1						
5-9	3	1						
10-14	5	1						
15-19	7	1						
20-49	9	1						
50+	8	1						

FIJI FILARIASIS PROGRAMME MASS DRUG TREATMENT FORM

Division			
Subdivision			
Municipality / Tikina			
Street / Ave. / Parade			
Village / Sett / Station			

Sheet No._____ Date_____

Drug Distributor

No	Name		ex ck)	weight	age	(no. of ta	treated	(tick)		not treated (tick)				commen	
NO	(full name)	M	F	· ············		DEC	Alb.	1	2	preg.	sick	infant	old	refuse	
1.															
2															
3															
4															
5															
6															·····
7							,								
8															
9															
10															
11															
12															
13															
14		4													
15								1							
	total									olvon inan					

1: taken immediately

2: taken later