

بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

قال الله تعالى

**قَالُوا سُبْحَانَكَ لَا عِلْمَ لَنَا إِلَّا مَا عَلَّمْتَنَا إِنَّكَ أَنْتَ الْعَلِيمُ
الْحَكِيمُ }**

صدق الله العظيم

سورة البقرة الآية 32

Dedication

To

The Soul and memory of my mother

To

My father.....who work hard for us

To

My beloved brothers and sisters

To

The people, whom I love, respect and appreciate.

Acknowledgement

I would like to thank Allah for giving me the patience and support to complete this research.

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Abstract

This cross-sectional study was carried out in Ommahani village in White Nile Province (WNP) during December 2008. The study aimed to determine the prevalence of Schistosomiasis. In this study, stool samples were collected from 200 participant (118 males and 84 females) and urine samples from 200 participant (104 males and 94 females) at age between 6-60 years were collected. The participant were categorized according to age group as follows, (6-16), (17-27), (28-38), (39-49) and (50 years and above). The stool samples were processed using kato-katz technique, while the urine samples were examined by ordinary sedimentation technique. The overall prevalence of urinary (*Schistosoma haematobium*) and intestinal (*Schistosoma mansoni*) schistosomiasis were found to be 10.5%, with 21 positive samples and 0% with no positive samples respectively.

For the positive cases of *S. haematobium*, the age group (6-16) had the highest disease prevalence 12/21 (57.1%). From these , 19 (90.5%) were males while 2 (9.5%) were female. *S.haematobium* egg intensity was found significantly higher in the age group (6-16) years, mean (7 egg/10ml) and also higher in males than in females, mean (5.73 egg/10ml).

Statistical analysis showed significant correlation between the egg intensity and clinical feature (haematouria), clinical feature (haematouria) and hatching test, and between the egg count and hatching test.

It was concluded that mass treatment by Praziquentel lead to a significant decrease in the disease prevalence as previous studies from the same area revealed higher prevalence.

أُجريت هذه الدراسة العرضية في قرية أم هاني في ولاية النيل الأبيض أثناء ديسمبر/كانون الأول 2008. هدفت الدراسة لقياس معدل إنتشار مرض البلهارسيا. في هذه الدراسة جُمعت 200 عينة براز (118 من الذكور و 84 من الاناث) و 200 عينة بول (104 من الذكور و 94 من الاناث) عشوائيا. الاشخاص تتراوح أعمارهم ما بين 6-60 سنة. تم تقسيم المجموعة الى فئات عمرية على النحو التالي : (6-16)، (17-27)، (28-38)، (39-49)، (50 فما فوق). عولجت عينات البراز بإستعمال تقنية الكاتو كاتر، بينما عولجت عينات البول بواسطة جهاز الطرد المركزي. الإنتشار العام للبولية (بلهارسيا المجاري البولية) كانت نسبته 10.5 %، بعدد 21 عينة إيجابية و 0% حيث (لم يتم التعرف على عينات إيجابية بالنسبة للمعوية (بلهارسيا المستقيم

بالنسبة للحالات الإيجابية لبلهارسيا المجاري البولية، كانت الفئة العمرية (6-16) ذات اعلى نسبة من حيث إنتشار المرض بعدد 12/21 ونسبة (57.1 %). ووجد أن عدد 19 (90.5 %) من المصابين كانوا من الذكور، وعدد 2 (9.5 %) كانوا من الاناث، من حيث كثافة بيض بلهارسيا المجاري البولية وُجدت أعلى في المجموعة العمرية (6-16) بمدة وأعلى أيضاً في الذكور من الاناث ، (7 egg/10ml)

. (5.73 egg/10ml)

اثبت التحليل الإحصائي علاقة وثيقة بين كثافة البيض والميزة السريرية (البول الدموي)، وبين الميزة السريرية (البول الدموي) و إختبار التفقس، وبين كثافة البيض و إختبار التفقس

استنتج بان العلاج الجماعي بالبرازاكونتيل تؤدي الي نقصان معذوي في انتشار المرض اعتماد على دراسات سابقة من المنطقة كشفت معدل انتشار اعلى لمرض البلهارسيا.

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