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Letter to the Editor

Alleviating the impact of the geohelminthiases in the COVID-19 crisis

Sir,

Alleviating geohelminthiases impact during 2019 coronavirus disease (COVID-19) is complicated. Various efforts have been made to reduce them.[1] Chemoprevention such as annual or biennial mass preventive drugs (MPD) with albendazole or mebendazole as a single dose for at-risk populations, including preschool children, school-age children, adolescent girls, childbearing age women, and pregnant women, is the form of short-term action. Long-term actions are providing clean water, improving sanitation and toilets, banning on the usage of stool as fertilizer, and counseling on a clean and healthy lifestyle (CHL) accompanied by implementing community based total sanitation (CBTS). The challenges of them are inconstancy in observing the programs, chemoprevention coverage growth in at-risk groups, drug resistance manifestation, and weak diagnostic methods.[2]

Moreover, MPD for at-risk communities was also delayed due to inconsistencies in anthelminthic distribution.[3] If coinfection between the geohelminthiases parasites and severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) increases complications and there is a shift in the comorbid age pattern to a younger age, then the burden of COVID-19 in endemic countries may be much worse than expected. However, the challenges of the COVID-19 crisis actually encourage these activities to be continued and integrated into ongoing COVID-19 prevention. However, every effort to increase the frequency and scale of MPD must be accompanied by programs to increase access to clean water, sanitation, and hygiene (WASH).[4]

The interruption and delay of the deworming control program due to COVID-19 temporarily impacted the progress of eliminating geohelminthiases as a public health problem (EPHP) by 2030.[5] Implementation of chemoprevention should be restarted as soon as possible to minimize the time without chemoprevention as quickly as possible, even if it is before the following chemoprevention schedule under normal circumstances. COVID-19 crisis can be turned into opportunities to increase the likelihood of achieving targets by implementing appropriate alleviation strategies. A year's period of chemoprevention in the general population after discontinuation could accelerate the achievement of the target for reducing morbidity by 2030.[6]

Stimulating efforts to control geohelminthiases by consolidating integrated interventions and collaborations through the expansion of MPD, CHL, WASH and CBTS in line with COVID-19 prevention efforts with alleviation innovations shifting from controlling morbidity to terminate the transmission of geohelminthiases.

This method accelerates progress towards the goal of geohelminthiases EPHP in 2030. It is recommended to integrate the expansion of MPD coverage and the program's implementation to increase access to WASH which focuses on supporting the COVID-19 health protocol. Obstacles to alleviating geohelminthiases due to the COVID-19 crisis must be minimized, and the program should be restarted immediately.

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