SANITARY EDUCATION FOR THE PREVENTION AND CONTROL OF HUMAN INTESTINAL PARASITOSIS ON THE BANKS OF PINTO RIVER, CÓRDOBA

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INTRODUCTION
In marginal populations with poor access to drinking water, limited sewage treatment, deficient participation of the state on the healthcare of the population and poor nutrition, intestinal parasitoses are one of the most prevalent diseases; they are one of the most prevalent infections worldwide (1).
Sanitary education is one of the essential cornerstones for health promotion and a main tool to modify the factors that determine the prevalence of intestinal parasitoses in these populations (2).
The goal of this work was to know the microbiological quality of drinking water, the epidemiologic, social and sanitary habits of the people of the area under study in order to determine the factors that condition the prevalence of human intestinal parasitoses and design and elaborate in this way the educational tools to improve hygiene behaviors to prevent the transmission of these pathologies.

MATERIALS AND METHODS
Epidemiologic survey
An observational, descriptive and transversal study was carried out in Costa del Río Pinto (Córdoba, Argentina) tackling the socio-epidemiologic dimensions that condition the prevalence of intestinal parasitosis (housing, water, excreta, sewage, pets, presence of symptoms, habits, nutrition, access to the health system).
Population studied: people that accepted to be surveyed (100%).
Instrument: after validation, a study of complete numbering or population census was carried out. INFOSTAT processing.
Laboratory analysis
Microbiologic analysis of drinking water on 35 samples: recount of aerobic mesophilic bacteria and multiple-tube technique.

RESULTS
The population census showed the following relevant data as to the risk factors for the prevalence of intestinal parasitoses: excreta deposition is carried on by means of drainage and a 100% of homes have brick bathrooms of which 54% are outside the home and shared with other people; a 100% of families consume water from the river and 80% have symptoms compatible with parasitoses as well as a history of parasitoses. There are dogs and chickens in a 100% of homes. There is no sewage collection system, sewage is burnt in every home. According to a medical report, there is no undernourishment in the area. The nearest health care center is 30 kilometers away.
The microbiologic analysis of drinking water included samples from the river, irrigations ditches, filter and homes. The analyzed samples did not comply with what is established by the Argentine Alimentary Code to classify as drinking water.
A sanitary education program designed by the career of Pharmacy was carried on for two years. It consisted in three health campaigns that included educational workshops with techniques of incentivation, recovery of popular consciousness, explanation of concepts, prevention measures, simulation activities and delivery of pedagogical-didactic materials.

CONCLUSIONS
The interdisciplinary work with the integration of curricular contents allowed us to understand the situation in an integral way and to propose solutions for intestinal parasitoses affecting urban marginal populations.

REFERENCES