**IT'S TIME TO FOCUS ON THE NUTRITIONAL STATUS OF BOYS**

P Shetty,* A Sejao, S Kowli.

**Introduction** Anemia and undernutrition, is a common problem in children below 5 years of age and women in reproductive age group. Poor nutritional status predisposes the individual to several diseases, which further deteriorates their nutritional status leading to a vicious cycle. Nutritional Intervention Programmes focuses on women in reproductive age group, pre-school children and adolescent girls. There are no active measures taken to improve the nutritional status of boys.

**Methodology** The study was conducted in seventh standards students of a public school in Mumbai. A written consent of the school authorities and parents was taken prior to undertaking the study. Haemoglobin and Body Mass Index was assessed along with nutrition education emphasising on the importance of iron rich food and balanced diet using interactive teaching methodology.

**Results** Haemoglobin and Body Mass Index was assessed in 116 and 114 students respectively. Mean age of the students was 12.97 years. Only 9.5% of the students had normal haemoglobin; 7% boys and 11.9% girls. Undernutrition was found in 62.3% of the students; 64.9% boys and 59.6% girls. The observed difference between boys and girls was found to be statistically significant.

**Conclusion** The higher percentage of boys with anaemia and under nutrition is a cause of concern. Weekly iron folic acid supplementation for the girls by the government seems to have contributed to a slightly lower prevalence of anaemia in girls as compared to boys. It is time that adolescent boys are also included in the nutritional intervention programmes.

---

**GEOGRAPHICAL DISTRIBUTION OF SCHISTOSOMIASIS AND ITS CONTROL IN NIGERIA**

1U Ekpo,* 2P Vounatsou, 3E Huerlimann, 2J Utzinger, 3C Mafiana, 4M Mafe, 1A Oluwole, 1M Abe, 5O Nebe, 5M Kadiri. 1University of Agriculture, Abeokuta, Ogun, Nigeria; 2Swiss Tropical and Public Health Institute, Basel, Switzerland; 3National Universities Commission, Abuja, Nigeria; 4National Institute for Medical Research, Yaba, Lagos, Nigeria; 5Federal Ministry of Health, Abuja, Nigeria

**Introduction** Nigeria is the most populous country in Africa with over 150 million people. Inadequate basic social amenities and weak primary healthcare infrastructure have promoted the transmission of schistosomiasis. Presently, there is little control programme due to absence of detail distribution of the disease that can be used in planning control programme in Nigeria.

**Methods** A search of articles related to schistosomiasis in Nigeria from PUBMED and local database was conducted. Search was limited to publications from 1990 to 2010. Additional reports were obtained from Federal Ministry of Health, Abuja and all the State Ministries of Health where schistosomiasis has been reported to access available information.

**Results** 526 relevant articles were accessed showing that schistosomiasis is endemic in 34 of 36 states and Abuja. Infection was reported from 652 locations, majorly from school children aged 5–14 years living in rural and semi urban areas. Schistosoma haematobium infection was reported from 493 (77.5%) locations in 35 (94.6%) states. Schistosoma mansoni was reported from 125 (19.9%) locations in 18 (48.6%) states. Schistosoma intercalatum has been reported from 17 (2.7%) locations in 1 (2.7%) state. Eighteen states reported both S mansoni and S haematobium infection. The prevalence reported from these locations ranges from 0.00-100.00 for S haematobium), (0.00-77.5 for S mansoni) and 2.5 for S intercalatum respectively.

**Conclusion** Schistosomiasis disease has a nation-wide distribution. There is the need for relevant government agencies to urgently address this problem through an aggressive mass treatment campaign, improve community sanitation and health education.