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Compliance With Guidelines on Seasonal Malaria Chemoprevention in Kwara State, Northcentral Nigeria

Conformité aux Directives sur la Chimio-prévention Saisonnière du Paludisme par les Distributeurs de Médicaments Communautaires dans l'État de Kwara, au Centre-Nord du Nigeria

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ABSTRACT

BACKGROUND: Seasonal malaria chemoprevention (SMC) is an effective strategy for reducing malaria morbidity and mortality in children aged 3-59 months in areas with seasonal malaria transmission. Sulphadoxine-pyrimethamine plus amodiaquine is given to an eligible child at monthly interval during the peak malaria transmission season. The aim of this study was to determine the level of compliance with SMC guidelines by community drug distributors during SMC implementation in Kwara State.

METHOD: Caregivers of eligible children from six Local Government Areas were interviewed using structured questionnaire on KoboCollect app downloaded on hand-held android devices. The questionnaire was composed of questions on caregiver's demographics, SMC drug administration, and adherence to SMC protocol.

RESULTS: A total of 1,314 caregivers were interviewed, most of them were female 1076 (81.9%), married 1200 (91.3%) and literate 795 (60.5%). The mean SMC coverage for the 4 cycles was 1183(88.5%). SMC information was received by 1166 (88.7%) of caregivers. Most of the caregivers 1166 (88.7%) heard about SMC. Overall, SPAQ administration was directly observed in most cases 1169 (91.5%), second dose was given 1226 (96.0%) and drugs were fully ingested 1140(89.3%). Poor compliance was observed in home visits by lead mothers 988 (77.4%). The report of adverse drug reactions was low 132 (10.3% [95% CI: 8.8-12.3%]), the commonest being severe vomiting 50 (37.9%). There were significant ($P < 0.05$) variations in SMC implementation across the 6 LGAs in virtually all the performance indicators. SPAQ administration to over-age children was low 128 (10.0%).

CONCLUSION: Overall, the compliance with SMC implementation guidelines in Kwara state was good though significant differences in performance were observed across the six LGAs. Home visits by lead mothers were generally poor. The self-reported coverage of SMC by caregivers was commendable. **WAJM 2024; 41 (1): 55 - 64.**

KEYWORDS: Seasonal Malaria Chemoprevention, SPAQ, Compliance, Children, Northcentral Nigeria, Rainy season

RÉSUMÉ

CONTEXTE: La chimioprévention saisonnière du paludisme (CSP) est une stratégie efficace pour réduire la morbidité et la mortalité liées au paludisme chez les enfants âgés de 3 à 59 mois dans les zones à transmission saisonnière du paludisme. La sulfadoxine-pyriméthamine associée à l'amodiaquine est administrée à un enfant éligible à intervalles mensuels pendant la saison de transmission maximale du paludisme. L'objectif de cette étude était de déterminer le niveau de conformité aux directives de la CSP par les distributeurs de médicaments communautaires lors de la mise en œuvre de la CSP dans l'État de Kwara.

MÉTHODE: Les aidants des enfants éligibles de six zones de gouvernement local ont été interrogés à l'aide d'un questionnaire structuré sur l'application KoboCollect sur des appareils android portables. Le questionnaire comprenait des questions sur les caractéristiques démographiques des aidants, l'administration des médicaments de la CSP et l'adhésion au protocole de la CSP.

RÉSULTATS: Au total, 1 314 aidants ont été interrogés, la plupart étaient des femmes 1 076 (81,9%), mariées 1 200 (91,3%) et alphabétisées 795 (60,5%). La couverture moyenne de la CSP pour les 4 cycles était de 1 183 (88,5%). La plupart des aidants 1 166 (88,7%) avaient entendu parler de la CSP. Dans l'ensemble, la première administration de SPAQ a été observée directement dans la plupart des cas 1 169 (91,5%), la deuxième dose a été administrée par 1 226 (96,0%) aidants et les médicaments ont été entièrement ingérés sans cracher partiellement ou totalement par 1 140 (89,3%) enfants. Une mauvaise conformité a été observée lors des visites à domicile par les mères responsables 988 (77,4%). Le signalement des réactions indésirables aux médicaments était faible 132 (10,3% [IC à 95% : 8,8-12,3%]), la plus courante étant les vomissements sévères 50 (37,9%). Des variations significatives ($P < 0,05$) dans la mise en œuvre de la CSP ont été observées dans les 6 LGAs pour pratiquement tous les indicateurs de performance. L'administration de SPAQ aux enfants plus âgés était faible 128 (10,0%).

CONCLUSION: Dans l'ensemble, la conformité aux directives de mise en œuvre de la CSP dans l'État de Kwara était bonne bien que des différences significatives dans les performances aient été observées dans les six LGAs. Les visites à domicile par les mères responsables étaient généralement mauvaises. La couverture autodéclarée de la CSP par les aidants était louable. **WAJM 2024; 41 (1): 55 - 64.**

MOTS-CLÉS: Chimio-prévention saisonnière du paludisme, SPAQ, Conformité, Enfants, Centre-nord du Nigeria, Saison des pluies

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Abbreviations: ADR - Adverse Drug Reaction; CI - Confidence Interval; CDD - Community Drug Distributor; DOT - Directly observed Treatment; LGA - Local Government Area; SMC - Seasonal Malaria Chemoprevention; SPAQ - Sulphadoxine-pyrimethamine + Amodiaquine; SPSS - Statistical Package for Social Sciences