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Intestinal parasitic diseases are a major public health concern.

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Editorial

Intestinal parasitic diseases are a major public health concern in many developing countries, owing to faeces contamination of water and food, as well as favourable climatic, environmental, and sociocultural factors that facilitate parasitic transmission. In humans and other species, these parasites live in the gastrointestinal tract. In comparison to helminthes, protozoan parasites usually cause gastrointestinal infections in urbanised countries. *Amoebiasis* is the third leading cause of death from parasitic diseases, and it has the greatest effect on people in developing countries. According to the World Health Organization (WHO), approximately 50 million people worldwide are infected with amoebic bacteria per year, resulting in 40-100 thousand deaths. According to current estimates, *Ascaris lumbricoides* will infect over a billion people, *T. trichiura* 795 million, and hookworms 740 million.

Intestinal helminths rarely kill people. The saddle of disease, on the other hand, is linked to lower mortality than the chronic and subtle effects on the host's health and nutritional status. In addition to their health consequences, intestinal helminth infections damage children's physical and mental development, obstruct educational achievement, and stymie economic growth. Ascaris lumbricoides, hookworms (Necator americanus), Trichuris trichiura, Strongyloides stercoralis, Entamoeba histolytica, and Giardia intestinalis are typical parasites found in most of the previous systematic investigations. Ascaris lumbricoides, hookworms (Necator americanus), Trichuris trichiura, Strongyloides stercoralis, Entamoeba histolytica, and Giardia intestinalis are typical parasites found in most of the previous systematic investigations. In India, as in other developing countries, intestinal parasitic infections are a serious

health problem. Intestinal parasitic diseases were found to be prevalent in 60% to 91% of children in rural and urban areas in and around Chennai, according to studies. The most common helminthic parasite found was Ascaris lumbricoides 52.8%, followed by Trichuris trichiura 45.6%. Epidemiological data on the spread and prevalence of intestinal parasites in low socioeconomic people from South Chennai is lacking. This pattern prompted us to investigate the distribution of intestinal parasites among slum dwellers in various parts of South Chennai, taking into account their age, education, diet, and hygienic factors. Due to their behaviour, intestinal parasites cause one of the most serious health problems by causing malnutrition, morbidity, and incapacitation, particularly in children compared to adults. The aim of this study was to determine the prevalence of intestinal parasites among slum dwellers in various areas of South Chennai. 194 of the 256 samples obtained from children aged 0-50 years were found to be positive. Each sample was subjected to standard parasitological diagnosis techniques in the laboratory. Inhabitants of low socioeconomic areas were found to have Entamoeba coli 23%, Cyclospora sp. 22.2%, Entamoeba histolytica 21.8%, Giardia intestinalis 14.4%, Ascaris lumbricoides 6.2%, Trichuris trichiura 1.1%, and Hymenolepis nana 2.7%. The prevalence of parasites in relation to sex and age revealed that females had more parasites than males. Furthermore, in comparison to older age groups, children and adolescents had more parasites. The number of parasites in higher education dwellers decreased as a percentage of educational status. Furthermore, children and teenagers had more parasites than older age groups. As a percentage of educational status, the number of parasites in higher education residents decreased.

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