

HUMAN FASCIOLIASIS



+ Impact goal

Elimination as a public health problem

+ Elimination targets

Zero cases of high-intensity infections (≥ 400 eggs per gram of feces) in children 5–14 years of age

A sustained prevalence $\leq 5\%$, by coprological tests

+ Programmatic target

$\geq 75\%$ coverage of triclabendazole (TCZ) mass drug administration (MDA) in eligible populations

Action steps to achieve elimination

Best buys

① Mass drug administration:

- Ensure at least 75% preventive chemotherapy (MDA) coverage using (TCZ) in population aged 5–65 years in areas with prevalence $>5\%$

② Improved food safety, water, sanitation and hygiene:

- Improve access to safe water for handwashing and food safety measures to avoid consumption of infected foods
- Improve latrines and wastewater management in risk areas

③ One Health approach:

- Strengthen collaboration between human health, animal health, and environmental health, including treatment of domestic animal reservoirs, pasture, and water sources management, and control of intermediate host snails and their preferred habitat

④ Monitoring and evaluation:

- Implement sentinel sites and prevalence and intensity of infection surveys in risk areas to adjust treatment frequency and optimize intervention strategies

More information

· Pan American Health Organization. Fascioliasis. Washington, D.C.: PAHO; 2025 [cited 18 April 2025]. Available from: <https://www.paho.org/en/topics/fascioliasis>.

· Pan American Health Organization. Operational guidelines for the elimination of human fascioliasis as a public health problem in the Americas. Washington, D.C.: PAHO; 2024. Available from: <https://doi.org/10.37774/9789275128084>.



Explore PAHO's Regional Revolving Funds portfolio to improve access to life-saving technologies