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Department of Education  
Region IX, Zamboanga Peninsula  
**SCHOOLS DIVISION OF ZAMBOANGA DEL NORTE**  
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Division Memorandum No. 001s. 2020

To: **Public Schools District Supervisors  
Elementary and Secondary School Heads  
District/School Nurses  
All Other Concerned**

From: **MA. LIZAR TABILON EdD, CESO VI**  
Schools Division Superintendent

Subject: **Mass Drug Administration Month for the Prevention and Control of Lymphatic Filariasis (LF), Schistosomiasis and Soil- Transmitted Helminthiasis (STH)**

Date: **January 8, 2020**

1. Under the 2020 Harmonized Schedule and Combined Mass Drug Administration (HSCMDA) for the Prevention and Control of Lymphatic Filariasis, Schistosomiasis, and Soil-Transmitted Helminthiasis, the DOH will conduct the Mass Drug Administration of Soil-Transmitted Helminthiasis (Round 2) and Lymphatic Filariasis in all schools starting the month of January 2020.
2. All District/School Health Nurses are directed to conduct the said activity effective January 13, 2020 and coordinate with the local RHU for possible support.
3. For submission of reports, please use previous template and send it through email: **medicaldentalznn@yahoo.com** not later than the **31<sup>st</sup> of January 2020**.
4. Attached herewith are the previous Report Template and regional advisory from DOH RO-IX.
5. For information, guidance and compliance.

Encl: As stated

JLC/Mass Drug Admin/SGODSHNS/DM001-2020



*"Be and Do Much Better Each Day with a Sense of Urgency"*





December 19, 2019

**2020 HARMONIZED SCHEDULE AND COMBINED MASS DRUG ADMINISTRATION  
(HSCMDA) FOR THE PREVENTION AND CONTROL OF LYMPHATIC FILARIASIS,  
SCHISTOSOMIASIS AND SOIL-TRANSMITTED HELMINTHIASIS**

**ADVISORY NO. 2**

**(For the Provinces of Zamboanga Sibugay, Zamboanga Del Sur and Zamboanga Del Norte Only)**

**FOR: PROVINCIAL/CITY/MUNICIPAL HEALTH OFFICES, DEPARTMENT OF EDUCATION (REGIONAL AND DIVISION OFFICES), PROVINCIAL DOH OFFICES, AND OTHER STAKEHOLDERS**

**FROM: EMILIA P. MONICIMPO, MD, MPH, CSEE**  
Director IV

**SUBJECT: Reiteration of Mass Drug Administration Month for the Prevention and Control of Lymphatic Filariasis (LF), Schistosomiasis and Soil-Transmitted Helminthiasis (STH)**

**I. Rationale**

The Zamboanga Peninsula - Center for Health Development, having considered the incidence of the three (3) neglected tropical diseases specifically Lymphatic Filariasis (LF), Schistosomiasis (SCH) and Soil - Transmitted Helminthiasis (STH) in the region which is addressed by preventive chemotherapy (PC), recognizes the importance and crucial role of the local government units to heighten its activities on prevention and control. As such, Department Memorandum 2016 - 0212 (Harmonized Schedule and Combined Mass Drug Administration (HSCMDA) for the Prevention and Control of Lymphatic Filariasis, Schistosomiasis, and Soil - Transmitted Helminthiasis) prescribe that every January be utilized for Soil Transmitted Helminthiasis (Round 2) and the whole month of July for Soil Transmitted Helminthiasis (Round 1) and Lymphatic Filariasis Mass Drug Administration.

However, due to the re-emergence of poliovirus type 1 case in the Municipality of Maluso, Basilan this led us to the conduct of the two (2) rounds of polio response immunization during the first quarter of 2020, these actions are equally critical to guarantee high population immunity among under ten years old children and protect the population from the consequences of polio virus infection.

This advisory shall provide technical guidance to the LGUs, all health care workers, DepEd partners and other stakeholders on the implementation of the HSCMDA in the cities of Zamboanga and Isabela, both for community and School-based.



## II. Schedule of Implementation

Disease	Area	Schedule of MDA
Soil Transmitted Helminthiasis	Zamboanga del Norte, Zamboanga del Sur, Zamboanga Sibugay	Round 2 (Whole month of January 2020)
		Round 1 (Whole month of July 2020)
Lymphatic Filariasis	Zamboanga del Norte	Whole month of January 2020
Schistosomiasis	Zamboanga del Norte, Zamboanga del Sur, Zamboanga Sibugay(Schistosomiasis Endemic Area ONLY)	Whole month of July 2020

## III. Drug of Choice, Dose and Coverage

### A. Lymphatic Filariasis

Based on Administrative Order No. 25-A, series of 1998, the drug of choice for LF is a combination of **Diethylcarbamazine citrate (DEC) 50mg** and **Albendazole (ALB)**.

Dose: DEC 50mg will be given at a dose of 6mg/kg of body weight and Albendazole at a dose of 400mg/single standardized dose. Both should be given **within 2 hours after a meal**.

Health workers may also use age-wise dosing as shown below.

#### Age - Wise Dose for Diethylcarbamazine citrate 50mg and Albendazole 400mg

AGE	NUMBER OF DEC TABLETS	NUMBER OF ALB TABLETS
2-5 years old	1 tablet	1 tablet
6-12 years old	2 tablets	1 tablet
13-20 years old	4 tablets	1 tablet
21+ years old	5 tablets	1 tablet

Coverage: Zamboanga City and Zamboanga Del Norte only

### B. Soil Transmitted Helminthiasis

Administrative Order No. 2010-0023 recommends **Albendazole 400mg (ALB)** or **Mebendazole (MBD)** for the prevention, control and treatment of soil - transmitted helminthiasis.

Dose: Albendazole 200mg or ½ tablet for children who are more than 1 but below 2 years old. Albendazole 400mg or 1 tablet for children who are 2 to 19 years old. Mebendazole 500mg for 1 to 19 years old.

These drugs are given every 4 or 6 months. Drug is administered **within 2 hours after a meal**.

Coverage: Entire Zamboanga Peninsula



### C. Schistosomiasis

Administrative Order No. 2009-0013 recommends the use of Praziquantel (PZQ) for mass drug administration in schistosomiasis endemic areas.

**Dose:** Single dose of 40mg/kg body weight to be given **within 2 hours after a meal**. In facilities that do not have a weighing scale, the table below could be used to estimate the PZQ dosages based on weight.

Table 2. Dose Calculation of Praziquantel, 600mg WEIGHT (kg)	NUMBER OF TABLETS	TOTAL DOSE (mg)
8-11	¾	450
12-15	1	600
16-18	1 ¼	750
19-22	1 ½	900
23-26	1 ¾	1050
27-30	2	1200
31-33	2 ¼	1350
34-37	2 ½	1500
38-40	2 ¾	1650
41-45	3	1800
46-49	3 ¼	1950
50-52	3 ½	2100
53-56	3 ¾	2250
57-60	4	2400
61-63	4 ¼	2550
64-67	4 ½	2700
68-71	4 ¾	2850
72-75	5	3000

Coverage: Zamboanga Del Norte, Zamboanga Del Sur, Zamboanga Sibugay (Schistosomiasis Endemic Area ONLY)

### IV. Target Population based on the new FHSIS indicators

DISEASE	TARGET POPULATION
Lymphatic Filariasis	2 years old and above (both community and school based)
<b>Community Based Deworming</b>	
Soil-Transmitted Helminthiasis	1-4 years old
	5-9 years old in the community (not enrolled in public schools)
	10-19 years old in the community (not enrolled in Public Schools)
Schistosomiasis	5-65 years old
❖ For school age children enrolled in private schools, the accomplishment will be reported under community based.	
<b>School Based Deworming</b>	
Soil-Transmitted	Kinder to Grade 4



Helminthiasis	enrolled in public schools
	Grade 5 to Grade 6
	enrolled public schools
	Grade 7 to K12 enrolled

**V. Computation of Eligible target population and Drug Requirement:**

**A. Lymphatic Filariasis**

Province/City	Eligible Population from Age 2 years old and above	Drug Requirement
Zamboanga City	803,457	4,017,285
Zamboanga del Norte	962,044	4,810,220

**B. Soil-Transmitted Helminthiasis**

Province/City	Projected Population	Eligible target from age 1-19 years old (not enrolled in Public Schools)	Kinder to K12 enrolled in Public schools
Zamboanga del Norte	834,756	140,181	213,255
Zamboanga del Sur	856,926	234,014	128,808
Zamboanga Sibugay	682,068	120,100	168,688
Zamboanga City	909,913	159,977	225,280
Dipolog City	137,564	25,219	33,033
Dapitan City	86,707	16,385	20,327
Isabela City	128,809	22,882	31,656

**C. Schistosomiasis**

PROVINCE/MUNICIPALITIES	TARGET POPULATION
<b>ZAMBOANGA SIBUGAY PROVINCE</b>	
ALICIA	1,918
TITAY	4,676
IMELDA	6,774
DIPLAHAN	1,035
<b>ZAMBOANGA DEL NORTE (SCHOOL BASE)</b>	
POLANCO	1,165
PIÑAN	256
SALUG	737
GODOD	280
<b>ZAMBOANGA DEL SUR</b>	
AURORA	9,985
RAMON MAGSAYSAY	9,696
TAMBULIG	21,609
MOLAVE	19,259
MAHAYAG	23,087
DUMINGAG	7,144

\*Projected population per province for year 2020



**Formula for community based MDA**

Indicator	Formula	Target
1.  Proportion of PSAC, 12-59 months' old	Numerator: No. of 1-4 years old (12-59 months old)  Denominator: Total Population X _____ %  Multiplier: 100%	85% and above
2. Proportion of SAC, 5-9 years old	Numerator: No. of 5-9 years old  Denominator: Total Population X _____ %  Multiplier: 100%	85% and above
3.  Proportion of Adolescents, 10-19 years old	Numerator: No. of SAC, 10-19 years old  Denominator: Total Population X _____ %  Multiplier: 100%	85% and above

**Multipliers to compute for age-specific population projections per province/city**

Age Group	Zamboanga del Norte	Zamboanga del Sur & Zamboanga City	Zamboanga Sibugay	Isabela City
1-4 years old (12 months to 59 months)	0.09820	0.09189	0.10205	0.10038
5-9 years old	0.11968	0.11403	0.12547	0.11505
10-19 years old	0.21753	0.21748	0.22368	0.22555

\*Please see Annex-for the drug allocation per municipality/district

**VI. Assessment of Eligible and Ineligible Individuals for MDA**

Health workers and/or teachers are strongly advised to make careful assessment of all individuals before administering the drug/s especially for contraindications.

**Ineligible Individuals by Disease and by Health Condition:**

DISEASE	CONTRAINDICATION	GIVE WITH CAUTION
Lymphatic Filariasis  Drug of Choice: DEC and ALB	Particular on DEC  Should not be given on the following individuals: 1. Children below 2 years old 2. Those who have cardiac or renal disease 3. Those who are pregnant	Particular on DEC  Should be given with caution to the following individuals: Those who have asthma Those who have history or are predisposed to



	<b>4. Bed ridden and seriously ill</b>	seizure episodes Those who have severe acute malnutrition or SAM
Soil - Transmitted Helminthiasis  Drug of Choice: ALB or MBD	No contraindication	<ol style="list-style-type: none"> <li>1. Seriously Ill Child/Adult</li> <li>2. Those experiencing abdominal pain at the time of MDA</li> <li>3. Individuals with diarrhea</li> <li>4. Children and adults who previously suffered a hypersensitivity reaction to the drug [Response: Manage existing condition prior to administration of MDA drugs]</li> <li>5. Those who have severe acute malnutrition [Response: Assess for presence or absence of medical complication and edema of both feet. If present, manage medical complications before giving MDA drugs. (Source: Community-based Management of Acute Malnutrition)]</li> </ol> <p>For uncomplicated severe malnutrition, with no medical complication and edema, children and adults may be given the drugs]</p>

**VII. Adverse Events Following Mass Drug Administration**

The following management shall be done to children and adults experiencing common Adverse Events Following Mass Drug Administration (AEFMDA):

<b>*Common Adverse Effects</b>	<b>**How to Manage</b>
Local sensitivity or allergy	Give antihistamine
Mild Abdominal Pain	Give Antispasmodic
Diarrhea	Give oral rehydration solution plus Zinc
Erratic worm migration	Pull out the worms from mouth/nose and dispose worm properly (see Annex 1, section on proper disposal)



\*The common adverse effects listed above and which are expected to manifest **within the first 10 hours after intake of either of the drugs** are mild and transient. Therefore in majority of the cases, treatment is not necessary.

Parents / caregivers are allowed to manage the adverse reactions, but if these reactions persist, a doctor shall be consulted and any of the AEFMDA team shall be informed.

Serious adverse reactions shall be reported to the AEFMDA Team.

A. The AEFMDA Team shall be composed of the following personnel at each level:

**City/Municipal Level:**

- a. City/Municipal Health Officer
- b. City/Municipal Epidemiology Surveillance Officer (CESU/MESU if available)
- c. Integrated Helminthiasis Control Program Coordinator
- d. Filariasis Elimination Program Coordinator
- e. Schistosomiasis Control and Elimination Program Coordinator
- f. DMO V/IV as DOH Representative
- g. School Health Nurse/Coordinator (for the school based MDA)

**Regional Level:**

- a. Integrated Helminthiasis Control Program Coordinator
- b. Filariasis Elimination Program Coordinator
- c. Schistosomiasis Control and Elimination Program Coordinator
- d. Regional Epidemiology Surveillance Officer
- e. Food and Drug Administration Officer
- f. School Health Nurse/Coordinator (for the school based MDA)
- g. Regional Health Education and Promotion Officer

These teams shall investigate the case at their level and assess if it is truly AEFMDA. If the event is considered secondary to the MDA drugs, the AEFMDA team shall recommend appropriate action when necessary. If further investigation is required, the team shall refer the case to the next higher level.

B. If hospitalization is needed, the AEFMDA team shall facilitate the referral to the nearest DOH retained hospital or in any provincial hospital.

**List of DOH Retained Hospitals /AEFMDA Referral Hospitals:**

PROVINCE/CITY	REFERRAL HOSPITAL
Isabela City	Basilan General Hospital
Zamboanga City	Labuan Public Hospital Zamboanga City Medical Center Mindanao Central Sanitarium
Zamboanga Del Sur	Zamboanga Del Sur Medical Center Margosatubig General Hospital
Zamboanga Del Norte	Dr. Jose Rizal Memorial Hospital





#### VIII. Logistics Distribution

City	Community Based Deworming (Point of Delivery and Date received)	School Based Deworming (Point of Delivery and Date received)
Zamboanga City	City Health Office (delivered on December 18, 2019)	DepEd Schools Division (delivered on December 18, 2019)
Isabela City	City Health Office (delivered on December 20, 2019)	DepEd Schools Division (delivered on December 20, 2019)

#### IX. Recording and Reporting of Weekly Accomplishment

The Lymphatic Filariasis and Soil Transmitted Helminthiasis Reporting Form (*please see annex -*) shall be used for the recording and reporting of the MDA accomplishment.

The **Program Coordinator** at the provincial level shall consolidate all the reports from their counterparts in the municipalities.

This to be **submitted weekly every Friday** starting **February 7, 14, March 6 and 13, 2019 at 4:00 PM** each week, unless otherwise modified, to the CHD Zamboanga Peninsula Infectious Disease Cluster email at [fdc.zpchd@gmail.com](mailto:fdc.zpchd@gmail.com).

Please be guided accordingly.

#### References:

1. Department Memorandum No. 2016 - 0212, Guidelines on the Implementation of the Harmonized Schedule and Combined Mass Drug Administration (HSCMDA) for the Prevention and Control of Lymphatic Filariasis, Schistosomiasis, and Soil - Transmitted Helminthiasis.
2. Administrative Order No. 2015 - 0054 Revised Guidelines on Mass Drug Administration and the Management of Adverse Events Following Deworming (AEFD) and Serious Adverse Events (SAE).

