

Abstract

Although schistosomiasis burden is greatest among school-age children (SAC) (6-15 years of age), infection among preschool-age children (PSAC) (1-5 years), may be underestimated in endemic areas. We conducted a cross-sectional study evaluating *Schistosoma mansoni* infection among children 1-15 years of age in a highly endemic community in Kenya. Diagnostic tests included stool exam (Kato/Katz technique), serum testing for schistosome-specific antibodies, and urine testing for circulating cathodic antigen (CCA). Overall, 268 SAC and 216 PSAC were enrolled; prevalence increased with age, with 14% of 1 year olds and more than 90% of children > 10 years of age infected. Stool exam was more sensitive among SAC than PSAC, but performance was similar after adjusting for infection intensity (based on CCA). Schistosomiasis poses a threat to PSAC in endemic areas, and stool exam may underestimate the prevalence of infection. Control programs in such areas should consider PSAC in addition to SAC.