Abstract

To report on and share the experiences, accomplishments and lessons learnt by African Medical and Research Foundation (AMREF), Sight Savers International (SSI), University of Nairobi (UON) and the Ministry of Health (MOH) during implementation of a three year Shompole trachoma control pilot study using azithromycin. The target of the project was to reduce the prevalence of active and potentially blinding trachoma by 50% by the year 2005. DESIGN: Community based survey. SETTING: Shompole location, Magadi division, Kajiado district of the Rift Valley Province of Kenya. SUBJECTS: Five hundred and twenty six randomly selected households from 166 manyattas (bomas/ homesteads) proportionately distributed in all the 13 villages of the four sub-locations of Shompole location were visited. Nine hundred and ninety eight children (1-9 years) and 898 adults (215 years) were examined for active trachoma (TF) and potentially blinding trachoma (TT) respectively. RESULTS: The prevalence of active trachoma (TF) in children has dropped from 46.4% in 2002 to 16.0% in 2006 and that of potentially blinding trachoma (TT) from 4.5% to 1.7% in the same period. Women have more TT than men. Out of the 15 cases of TT reported in the survey, only two were recurrences. The prevalence of active trachoma (TF) is higher in boys than girls, p=0.044. The proportion of children with clean faces has not changed but the proportion of children with many (>5) flies has drastically reduced from 48.0% in 2002 to 6.0% in 2006. The community holds strong negative believes about pit latrines. The project is sustainable. CONCLUSIONS: This project has positively influenced eye care policy locally and globally. The targets for "SA" components of SAFE were achieved while "FE" components were partially achieved. RECOMMENDATIONS: The ongoing scale up of the project to cover the whole of Kajiado district is justified. Formative study and review of the project's health promotion strategy is necessary. Collaboration and joint planning with neighbouring endemic districts of Kenya and Tanzania should be encouraged because of the nomadic nature of the Maasai who are the project beneficiaries.