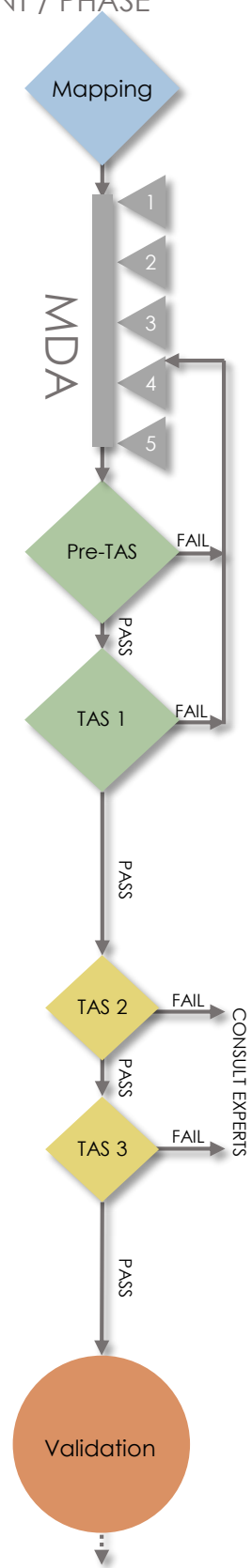
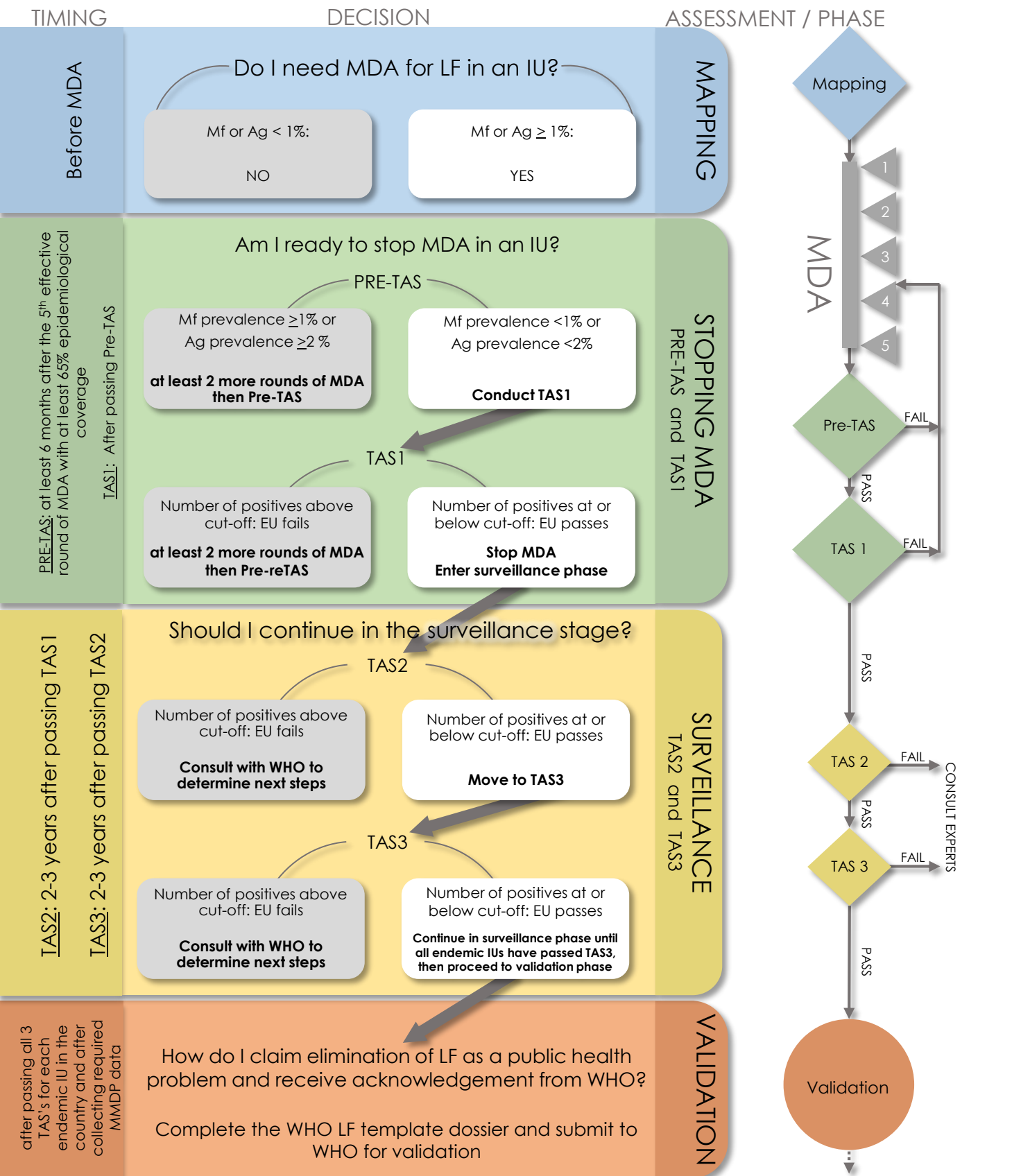


# DISEASE-SPECIFIC ASSESSMENTS for LYMPHATIC FILARIASIS (LF)

Goal: elimination of LF as a public health problem

Note that this job aid only includes information on mandatory assessments and does not include optional assessments, such as mid-term and MDA coverage surveys. Methodologies for each assessment can be found on the back of this job aid.



Abbreviations

Ag: antigenaemia	IU: implementation unit	MMDP: morbidity management and disability prevention	STH: soil-transmitted helminths
EU: evaluation unit	MDA: mass drug administration	PC: preventive chemotherapy	TAS: transmission assessment survey
ICT: immunochromatographic test	Mf: microfilaria	Pre-reTAS: repeated spot-check site assessments after the 2 <sup>nd</sup> additional MDA round needed to confirm eligibility for repeated TAS1	WHO: World Health Organization

# DISEASE-SPECIFIC ASSESSMENTS for LYMPHATIC FILARIASIS (LF)

## Methodologies

**Sampling methodology:** After defining the IU for MDA in the country, implement mapping by a) reviewing existing information and then b) conducting mapping surveys. Consult WHO if there is a need for mapping.

**Diagnostics:** Diagnostics are based on detecting the parasite. Use one of the following:



### Night Blood Smears

(to detect Mf in *Brugia* spp.-endemic and/or *W. bancrofti*-endemic areas)



### ICT Cards



### Filariasis Test Strips

(to detect Ag in *W. bancrofti*-endemic areas)

If there is need for remapping, consult WHO.

MAPPING

## PRE-TAS

**Sampling methodology:**

- Community-based, at least one sentinel and one spot check site per 1,000,000 population or per IU
- The same sentinel site assessed during mapping or baseline sentinel site data collection should act as the sentinel site during pre-TAS
- The pre-TAS spot-check site should be chosen as a high risk (e.g., low MDA coverage) site
- The sites should have stable populations that are not affected by migration, and have the same demographic characteristics as the IU.
- Each site should have at least 500 individuals, such that at least 300 individuals of all ages >5 years old can be tested.
- If implementing a Pre-reTAS, two spot check sites should be chosen and in *W. bancrofti*-endemic areas FTS should be used.

**Diagnostics:** Diagnostics are based on detecting the parasite. Use one of the following:



### Night Blood Smears

(to detect Mf in *Brugia* spp.-endemic and/or *W. bancrofti*-endemic areas)



### ICT Cards



### Filariasis Test Strips

(to detect Ag in *W. bancrofti*-endemic areas)

STOPPING MDA  
PRE-TAS and TAS1

## TAS1

**Sampling methodology:**

- TAS is implemented in evaluation units (EUs) which are equal to IUs, part of an IU, or a collection of IUs.
- If the primary school enrollment rate is  $\geq 75\%$ , surveys should be school-based; If not, surveys should be household-based.
- Test 6- and 7-yr-old children.
- Sample size and sampling guidelines can be calculated using the Survey Sample Builder, a tool that also generates the critical cut-off values. Cut-off values depend on the parasite and vector combination.

**Diagnostics:** Diagnostics are based on detecting the parasite. Use one of the following:



### Brugia Rapid Tests

(to detect filarial antibodies in *Brugia* spp.-endemic areas)



### ICT Cards



### Filariasis Test Strips

(to detect Ag in *W. bancrofti*-endemic areas)

FTS are available at no charge to programmes for use during TAS upon request. Efforts can be made to incorporate other disease assessments into TAS, such as for STH, in order to make informed – and coordinated – decisions around stopping MDA and continuing PC for other diseases.

SURVEILLANCE  
TAS2 and TAS3

## TAS2 and TAS3

Same methodology and diagnostics as TAS1 above.

## Key resources



Monitoring and epidemiological assessment of mass drug administration in the global programme to eliminate lymphatic filariasis: A manual for national elimination programmes. World Health Organization, 2011

WHO Training in monitoring and epidemiological assessment of mass drug administration for eliminating lymphatic filariasis.

