

Cost and consequences of trachoma survey and mass drug administration in the Narok district in Kenya (abstract)

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Abstract:

Purpose: To determine and compare the cost of MDA using two survey methods. **Methods:** An impact survey was conducted to justify continuation of MDA in Narok district (543,199 people). The district was segmented into 5 segments (trachoma districts) of approximately equal population and surveyed. Cost of MDA was estimated using the prevalence estimate for the entire district (the standard survey method) and for individual segments (proposed survey by trachoma district method). The starting threshold for MDA is 10% prevalence of active trachoma in children aged 1-9 years. **Results:** Prevalence in the entire district was 11.0% and MDA was justified while in the segments it was 0.4%, 2.3%, 4.1%, 21.6% and 26.8% and MDA was justified two segments only. The cost of MDA in the entire district was 28,246 dollars. The cost of conducting survey by the standard and the "trachoma district" methods was 27,160 and 32,592 dollars respectively. **Conclusions:** The cost of MDA was higher than the cost of survey since MDA is administered annually. Exclusion of three segments from MDA justified the added cost of conducting the survey by "trachoma districts".