Imported infectious diseases among newly arrived Eritrean refugees in Switzerland
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Background
A quarter of refugees arriving in Switzerland in 2015 originated from Eritrea. Yet, data on health status of Eritrean immigrants in Switzerland are scarce. We report preliminary data from screening for selected infectious diseases among asymptomatic newly arrived Eritrean refugees in Switzerland.

Methods
The study started in January 2016 with recruitment still on-going. Asymptomatic Eritrean refugees aged ≥16 years who arrived in Switzerland in 2015 are recruited via cantonal refugee registries. Screening for infectious diseases comprises 2 stool samples for protozoa and helminths, serology for HIV, hepatitis B and C, syphilis and schistosomiasis, circulating cathodic antigen (CCA) in urine and malaria PCR in blood. We anticipate having enrolled ≥150 participants by November 2016.

Results
At submission of the abstract 62 participants (53 male, 9 female), median age 23 years (inter-quartile range: 19-28), were enrolled. Fourteen (34%) had ≥1 pathogenic parasite detected in stool examination (10 Schistosoma mansoni, 6 Giardia lamblia, 5 Hymenolepis nana, 5 others); 27(44%) had a positive CCA test in the urine, indicating active schistosomiasis infection. Among those with schistosomiasis 45% had level D peri-portal fibrosis according to World Health Organization’s ultrasound classification. Four (7%) had a positive PCR for Plasmodium vivax. All had negative serology for HIV, hepatitis B and C and syphilis.

Conclusion
More than one out of three asymptomatic Eritrean refugees had at least one pathogenic parasite detected in stool examinations, nearly half had evidence of active schistosomiasis, often with substantial pathological lesions - none was aware of it. And 1 out of 15 had a Plasmodium vivax infection.

Key messages:
- Routine screening for stool-parasites, schistosomiasis using CCA and malaria using PCR may be considered in refugees arriving from Eritrea
- Such screening may prevent long term sequelae from untreated schistosomiasis or relapsing malaria episodes