Prevalence and risk factors of soil-transmitted helminth infection among farmers in Gelgel Village, Klungkung District, Bali, Indonesia

PUTU INDAH BUDI APSARI1*, ANAK AGUNG GEDE INDRANINGRAT1, HENY ARWATI2, YOES PRIJATNA DACHLAN3

1Department of Microbiology and Parasitology, Faculty of Medicine and Health Science, Universitas Warmadewa. Jl. Terompong, Panjer, Denpasar 80235, Bali, Indonesia. Tel.: +62-361-240727, *email: putuindah51@yahoo.com
2Department of Parasitology, Faculty of Medicine, Universitas Airlangga. Jl. Mayjen Prof. Dr. Moestopo No. 47, Pacar Kembang, Surabaya 60132, East Java, Indonesia

Prevalence and risk factors of soil-transmitted helminth infection among farmers in Gelgel Village, Klungkung District, Bali, Indonesia. Biodiversitas 21: 1535-1540. Soil-transmitted helminths infection remains a problem in tropical and subtropical regions worldwide. Indonesia is one of the tropical countries with a high prevalence of STH infection in children and high-risk population such as farmers. This study aimed to assess the prevalence and risk factors of STH infection from farmers. STH infection was diagnosed by Kato-Katz modified technique, while risk factors relevant to STH infection were assessed by a questionnaire. Data were analyzed by logistic regression and multiple regression test. A total of 162 fecal samples and questionnaires were obtained from 250 participants. Twenty-two subjects (13.5%) were positive, and 140 subjects (86.5%) were negative for STH infection giving the prevalence rate of 13.5% among farmers. Several significant risk factors for STH infection were age, gender, level of study, income, eating fresh unwashed vegetable, hand washing without soap, defecation site, without wearing hand gloves and protective cloth, bare walking foot, and the use of synthetic fertilizer. So we can conclude that personal hygiene factors were the most contributed factors for STH infection.

Keywords: Bali, farmers, prevalence, risk factors, soil-transmitted helminth

INTRODUCTION

The soil-transmitted helminths are a group of parasitic nematode helminths that are transmitted primarily through contaminated soil. This group causes human infection through contact with parasite eggs or larvae (Bethony et al. 2006). These helminths grow in the warm and moist soil of the world’s tropical and subtropical countries (Bethony et al. 2006). More than 1.5 billion population in the world infected by STH. Of particular worldwide importance species are the roundworms (Ascaris lumbricoides), whipworms (Trichuris trichiura), and Hookworms (Necator americanus and Ancylostoma duodenale) (WHO 2017) Population at risk are children, farmers, gardeners and tea pickers (WHO 2017). In rural population of Indonesia, the prevalence of STH infection among farmer were 13.5% and immune protection was not be able to clear the parasite (Apsari et al. 2018). In Bali, during 2004-2011 the prevalence of STH infection in rural populations was relatively high, 74% for A. lumbricoides, 63% for T. trichiura, and 35% for Hookworm. In 2004 more than a thousand students from 37 primary schools in Singaraja, Badung, Denpasar, Klungkung, Gianyar, and Bangli areas showed an average prevalence of STH infection of 58.3% - 96.8% (Sudarmaja et al. 2011). The STH infection is related to poverty, low social-economic status, and decreased productivity (WHO 2017)

In Vietnam, the most prevalence of STH infection was in children aged less than 12 years compared with adults, related to the maturity of the immune system, knowledge and education, and better hygiene behavior in adults (Pham-Duc et al. 2013). The increased prevalence of STH infection also relates to individual education levels, land-related work such as agriculture, fish farming, and plantations (Ensink et al. 2005). Risk factors obtained in households include the use of latrines in households, building construction, sanitation, handwashing before meals (Pham-Duc et al. 2013). Risk factors associated with employment as farmers are the use of wastewater for land irrigation and the use of manure fertilizers as plant fertilizers, the use of personal protective equipment (footwear and gloves) during work, handwashing behavior after work (Ensink et al. 2005). In Indian fishing village, the parental occupation, the child’s age, and mother’s education as the potential risk factors contributing to the high intensity of STH infection (Naish et al. 2004).

In addition to the above-mentioned climatic factors, Indonesia is a tropical climate with high humidity and temperature that supports the development of larva and worm eggs. The level of education, the majority of Indonesian people still live in villages with low levels of education, so that the understanding of personal hygiene and personal health and the environment is very low, such as large waste in any place (on land or river), do not use...
footwear in daily activities outside the house and often do not wash hands before eating (WHO 2017; Widjana et al. 2000). Socio-economic, mostly Indonesians, low-income, causes the community's inability to provide individual and environmental sanitation (Widjana et al. 2000).

This study aimed to analyze prevalence and risk factors of STH infection focused on the adult population with high-risk occupations, especially farmers. Klungkung District was chosen because they had the largest population working in agricultural so the soil exposure will be frequent.

MATERIALS AND METHODS

This study was conducted in December 2017 until January 2018. The design of the study is descriptive-analytical research and implemented with a cross-sectional design. Data were collected from the adult farmer in Gelgel Village, Klungkung District, Bali, Indonesia (Figure 1).

Samples

A total of 250 farmers in Gelgel Village were selected by simple random sampling. Fecal analyses with Kato-Kats methods were performed in the Parasitology laboratory at Udayana University. The intensities of STH infection then categorized by the World Health Organization (for roundworms: Light [1-4999 epg], Moderate [5000-49.999], High [>49.999]; for hookworms: Light [1-1999 epg], Moderate [2000-3999], High [>3999]; and for whipworms: Light [1-999 epg], Moderate 1000-9999], High [>9999] (WHO 1991; Levecke et al. 2010).

Ethical consideration

Faculty of Medicine Airlangga University approved this study and release ethical certificate number 294/EC/KEPK/FKUA/2017. The headman of Gelgel Village also approved this study.

Data collection

One month before collecting data, we met the headman of farmers and informed him how this study would be conducted. In the first step, we asked for approval to follow this study by signed in informed consent. Then the subjects would be interviewed by systematical questionnaires by the researchers and gave them a 50 ml fecal container. Tomorrow morning after subjects defecated, they should put the fecal in container gave before. Fecal samples and questionnaires were collected from farmers, and the fecal sample will be added 10% formalin until 50 mL. The intensity of infection was determined by Kato-Katz thick smear method resulted in the number of eggs per gram of feces (EPG) (WHO 1991). Fecal containers volume 50 ml were given to subjects, and these containers were collected back in the next morning. Fecal samples were then fixed with 10% formalin and stored in a sample box about 4°C. Fecal specimen is examined by Kato-Katz thick smear use malachite green dying to define and count egg per gram (EPG) feces based on WHO counting method (1991). Morphology of egg per species was identified by microscopic analysis (Olympus, Tokyo, Japan) with an objective lens of 10x. The number of a positive egg was multiplied by 24 (WHO 1991; Levecke et al. 2010).

Data analysis

The prevalence of STH infection was assessed using distribution frequency table, and risk factor analyses then examined using Logistic regression and multiple regressions in SPSS 16.

Figure 1. Map of Gelgel Village, Klungkung District, Bali, Indonesia
RESULTS AND DISCUSSION

Results
A total of 162 fecal samples were collected from 250 selected farmers at the Gelgel Village, out of the 22 fecal samples were positive of STH infection, and 140 samples were negative. The prevalence of STH infection among farmers was 13.5%. Most of the infected subjects were male age intervals of 54-64 years, the length of work for about 20 years, and the duration of work for about 9 hours. Most of the subject has passed an elementary school and also cattle owners with low income under 250 thousand rupiah per month (Data 2017). All data are shown in Table 1.

Based on the helminth’s egg identification, it could be stated that a single infection of A. lumbricoides, T. trichiura, and Hookworm was 1.85% (3/162), 9.26% (15/162), and 0.61% (1/162), respectively. The mixed infection was detected in A. lumbricoides with T. trichiura (1.23%), and A. lumbricoides with Hookworm (0.61%) (1/162). The highest mean EPG was found in A. lumbricoides infection where as many as 160 eggs per gram feces counted, then was followed by Ascaris+Hookworm mixed infection of 144 eggs per gram feces, Trichuris+Ascaris 132 eggs per gram of feces, while in single infection of Hookworm and T. trichiura was 48 and 53.5 eggs per gram of feces, respectively. The intensity of infection according to the WHO table is entirely mild. All data are shown in Table 2. The significant risk factors affecting STH infection were eating raw vegetables of their yield (OR = 4.4 p <0.05) and the place of defecation in a river or rice field (OR = 4.7 p <0.05).

Statistical analysis of risk factors showed that significant risk factors for STH infection were age, gender, level of study, income, eating fresh unwashed vegetables, hand washing without soap, defecation site, not wear hand gloves, not wear protective cloth, unprotected foot, and using fertilizer (Table 4).

Table 1. Characteristic of subjects based on biography and social-economic conditions analyzed by cross-tabulation

| Characteristic of subject | STH positive (n = 22) | STH negative (n = 140) |
|---------------------------|----------------------|------------------------|
| Age (year); mean ± SD*    | 55.59 ± 8.1          | 55.11 ± 10.9           |
| Duration of work (year); mean ± SD | 21.9±11.4          | 20.7± 13.8            |
| Work hour (hour); mean ± SD | 9.1± 1.6          | 8.6± 1.7             |
| Gender; n (%)             |                      |                        |
| Male                      | 12 (54.5)            | 90 (64.3)              |
| Female                    | 10 (45.5)            | 50 (35.7)              |
| Level of study; n (%)     |                      |                        |
| Understudy                | 9 (40.9)             | 39 (27.9)              |
| Elementary                | 9 (40.9)             | 70 (50.0)              |
| Junior high               | 1 (4.5)              | 12 (8.6)               |
| High                      | 3 (13.6)             | 18 (12.9)              |
| University                | 0 (0)                | 1 (0.7)                |
| Salary per month (IDR); n (%) | 12 (54.5)           | 72 (51.4)              |
| <250 thousand             | 10 (45.5)            | 62 (44.3)              |
| 500-1 million             | 0 (0)                | 6 (4.3)                |
| >1 million                |                      |                        |
| Cattle owner; n (%)       |                      |                        |
| Yes                       | 17 (77.3)            | 117 (83.6)             |
| No                        | 5 (22.7)             | 23 (16.4)              |

Note: *n: total amount, SD: standard deviation

Tabel 3. Characteristic of hygiene behavior between infected subject versus non-infected subject

| Characteristics of subjects | STH Positive | STH negative |
|-----------------------------|--------------|--------------|
|                            | n (%)        | n (%)        |
| Eating fresh unwashed vegetables |              |              |
| Yes                         | 18 (12.4)    | 127 (87.6)   |
| No                          | 4 (23.5)     | 13 (76.5)    |
| Hand washing                |              |              |
| Yes                         | 12 (17.6)    | 56 (82.4)    |
| No                          | 10 (10.6)    | 84 (89.4)    |
| Boiling water               |              |              |
| Yes                         | 18 (14.9)    | 103 (85.1)   |
| No                          | 4 (9.8)      | 37 (90.2)    |
| Defecation site             |              |              |
| Toilet                      | 12 (9.2)     | 119 (90.8)   |
| River                       | 10 (32.3)    | 21 (67.7)    |
| Using hand gloves           |              |              |
| Yes                         | 4 (25)       | 12 (75)      |
| No                          | 18 (12.3)    | 128 (87.7)   |
| Using personal protective equipment |        |              |
| Yes                         | 6 (9.5)      | 57 (90.5)    |
| No                          | 16 (16.2)    | 83 (83.8)    |
| Using boot shoes            |              |              |
| Yes                         | 2 (5.9)      | 32 (94.1)    |
| No                          | 20 (15.6)    | 108 (84.4)   |
| Using growth fertilizer     |              |              |
| Human feces                 | 0 (0)        | 0 (0)        |
| Animal feces                | 9 (9.0)      | 91 (91)      |
| Synthetic fertilizer        | 13 (21)      | 49 (79)      |

Table 2. Species distribution, mean of EPG and Intensity of STH infection

| Species                  | n (%) | Mean±SD (EPG) | Intensity of infection* |
|--------------------------|-------|---------------|-------------------------|
| *Ascaris lumbricoides    | 3 (1.85) | 160±176       | Mild                    |
| *Trichuris trichiura     | 15 (9.26) | 53.5±27.9    | Mild                    |
| *Hookworm                | 1 (0.61)  | 48            | Mild                    |
| *Ascaris+Trichuris       | 2 (1.23)  | 132±118       | Mild                    |
| *Ascaris + hookworm      | 1 (0.61)  | 144           | Mild                    |

Note: * Category based on WHO (2017)
Table 3. Risk factor of any STH species

| Risk factor                      | Species       | AL | AL+HW | HW  | TT  | TT+AL |
|----------------------------------|---------------|----|-------|-----|-----|-------|
| Gender                           |               |    |       |     |     |       |
| Male                             |               | 2(16.7) | 0(0) | 0(0) | 8(66.7) | 2(16.7) |
| Female                           |               | 1(12.5) | 1(12.5) | 1(12.5) | 5(62.5) | 0(0) |
| Level of study                   |               |    |       |     |     |       |
| Understudy                       |               | 1(11.1) | 1(11.1) | 1(11.1) | 5(55.6) | 1(11.1) |
| Elementary                       |               | 2(28.6) | 0(0) | 0(0) | 4(57.1) | 1(14.3) |
| Junior high                      |               | 0(0) | 0(0) | 0(0) | 1(100) | 0(0) |
| High                             |               | 0(0) | 0(0) | 0(0) | 3(100) | 0(0) |
| University                       |               | 0(0) | 0(0) | 0(0) | 0(0) | 0(0) |
| Salary per month                 |               |    |       |     |     |       |
| <250 thousand                    |               | 0(0) | 1(8.3) | 1(8.3) | 9(75.0) | 1(8.3) |
| 500-<1 million                   |               | 3(37.5) | 0(0) | 0(0) | 4(50.0) | 1(12.5) |
| >1 million                       |               | 0(0) | 0(0) | 0(0) | 0(0) | 0(0) |
| Additional occupation beside farmer |             |    |       |     |     |       |
| Labour                           |               | -  | -     | -  | -  | -     |
| Housewife                        |               | -  | -     | -  | -  | -     |
| Cattle owner                     |               | 2(12.5) | 0(0) | 0(0) | 12(75) | 2(12.5) |
| Cattle owner                     |               |    |       |     |     |       |
| No                               |               | 1(25) | 1(25) | 1(25) | 1(25) | 0(0) |
| Yes                              |               | 2(25) | 0(0) | 0(0) | 12(75) | 2(12.5) |
| Eating fresh unwashed vegetables |               |    |       |     |     |       |
| No                               |               | 3(18.8) | 0(0) | 1(6.2) | 10(62.5) | 2(12.5) |
| Yes                              |               | 0(0) | 1(25) | 0(0) | 3(75) | 0(0) |
| Hand washing with soap           |               |    |       |     |     |       |
| Yes                              |               | 2(20) | 1(10) | 0(0) | 5(50) | 2(20) |
| No                               |               | 1(10) | 0(0) | 1(10) | 8(80) | 0(0) |
| Boiling water                    |               |    |       |     |     |       |
| Yes                              |               | 1(25) | 0(0) | 1(25) | 2(50) | 0(0) |
| No                               |               | 2(12.5) | 1(6.2) | 0(0) | 11(68.8) | 2(12.5) |
| Defecation site                  |               |    |       |     |     |       |
| Toilet                           |               | 0(0) | 0(0) | 0(0) | 0(0) | 0(0) |
| River                            |               | 3(15) | 1(5) | 1(5) | 13(65) | 2(10) |
| Using hand gloves                |               |    |       |     |     |       |
| Yes                              |               | 2(66.7) | 1(33.3) | 0(0) | 0(0) | 0(0) |
| No                               |               | 1(5.9) | 0(0) | 1(5.9) | 13(76.5) | 2(11.8) |
| Using personal protective equipment |           |    |       |     |     |       |
| Yes                              |               | 2(40) | 1(20) | 0(0) | 2(40) | 0(0) |
| No                               |               | 1(67) | 0(0) | 1(6.7) | 11(73.3) | 2(13.3) |
| Using boat shoes                 |               |    |       |     |     |       |
| Yes                              |               | 2(11.1) | 1(5.6) | 1(5.6) | 12(66.7) | 2(11.1) |
| No                               |               | 2(11.1) | 1(5.6) | 1(5.6) | 12(66.7) | 2(11.1) |
| Using fertilizer                 |               | -  | -     | -  | -  | -     |
| Human feces                      |               | -  | -     | -  | -  | -     |
| Animal feces                     |               | -  | -     | -  | -  | -     |
| Synthetic fertilizer             |               | 3(15) | 1(5) | 1(5) | 13(65) | 2(10) |

Table 4. Multivariate analyses of risk factor of STH infection based on multinominal regression

| Risk factor                      | P         |
|----------------------------------|-----------|
| Age                              | 0.001*    |
| Gender                           | 0.057     |
| Level of study                   | 0.029*    |
| Income                           | 0.001*    |
| Additional occupation beside farmer | n.a.  |
| Cattle owner                     | 0.116     |
| Eating fresh unwashed vegetables | 0.998     |
| Hand washing without soap        | 0.024*    |
| Boiling water                    | 0.078     |
| Defecation site                  | 0.001*    |
| Not wear gloves                  | 0.269     |
| Not wear protective cloth         | 0.804*    |
| Unprotected foot                  | 0.030*    |
| Using fertilizer                 | 0.003*    |

Note: *Significantly p<0.05

Table 5. Risk factor significance by analyses of each variable

| Risk factor                      | 95% confidence interval |
|----------------------------------|-------------------------|
| Gender                           |                         |
| Male                             | 0.107 2.241 3.568       |
| Female                           | -  -                     |
| Level of study                   |                         |
| Unstudy                          | n.a. n.a. n.a.          |
| Elementary                       | 0.179 0.277 917.8       |
| Junior high                      | 0.067 8.049 3.817       |
| High                             | 0.907 6.467 4.073       |
| University                       | 0.981 0.000 n.a.        |
| Salary per month                 |                         |
| <250 thousand                    | 0.944 0.000 n.a.        |
| 500-<1 million                   | 0.943 0.000 n.a.        |
| >1 million                       | n.a. n.a. n.a.          |
| Additional occupation besides farmer |             |
| Labour                           | 0.092 0.000 n.a.        |
| Housewife                        | 0.091 0.000 n.a.        |
| Cattle owner                     | 0.093 0.000 n.a.        |
| No                               | 0.095 0.000 n.a.        |
| Eating fresh unwashed vegetables |                         |
| Yes                              | 0.083 4.26 1.840       |
| No                               | n.a. n.a. n.a.          |
| Handwashing with soap            |                         |
| Yes                              | 0.139 3.487 8.003       |
| No                               | -  -                     |
| Boiling water                    |                         |
| Yes                              | -  -                     |
| No                               | -  -                     |
| Defecation site                  |                         |
| Toilet                           | 0.954 0.000 n.a.        |
| River                            | n.a. n.a. n.a.          |
| Using hand gloves                |                         |
| Yes                              | 0.862 2.648 4.262       |
| No                               | -  -                     |
| Using personal protective equipment |                   |
| Yes                              | -  -                     |
| No                               | 0.038 4.846 0.546       |
| Using boat shoes                 |                         |
| Yes                              | 0.87 1.869 4.570        |
| No                               | -  -                     |
| Using fertilizer                 |                         |
| Human feces                      | n.a. n.a. n.a.          |
| Animal feces                     | n.a. n.a. n.a.          |
| Synthetic fertilizer             | 0.025 0.001 0.634       |

Discussion

Prevalence of STH infection

STH infection remains a major health problem in many poor and developing countries. Consistent with the findings of previous studies, this study shows that the prevalence of STH infection among farmers is 13.5%, the same as the previous study in Kumasi, Ghana. Most of the farmers consume their own vegetable product that increases the risk of STH ova exposure (OR=1.25, CI 95%) (Amoah et al. 2016). The prevalence of STH infection among adult also have been reported in Nyanza, Kenya, overall 15.7% adult positive for STH infection. The possibility for adults as the carrier of STH was evaluated in Akonolinga, Cameroon, an infected adult, might constitute a potential parasite reservoir and a source of dissemination and persistence of STH infection (Bopda et al. 2016).

The prevalence of *A. lumbricoides* infection in this study was 1.85%, this result is in accordance with the study.
conducted by Ensink et al. (2005), the prevalence of *A. lumbricoides* infection was 1.9%. They also obtained *Hookworm* prevalence ranges from 0.6% in regular farmers, similar to his study (0.6%). The prevalence of *T. trichiura* infection in this study was 9.26%. In a study conducted by Pham-duc et al. (2013), the *T. trichiura* prevalence was 40%, higher than this study. The reasonable cause must be the utilization of human excreta as fertilizer in farmland in Vietnam but in this study, nobody farmers using human excreta as fertilizer. High transmission of STH infected egg also increased by fecal contains egg (Pham-Duc et al. 2013). This study obtained EPG ranged between 48-160. This result is in accordance with research conducted by Amoah et al. (2016) with the average number of eggs per gram of feces in the rainy season 4-223 EPG and in dry season 3 -124 EPG. The range of a number of the egg influenced by many factors, but the average of EPG was the same as the previous study. The farmers of rice, vegetables, and maize in Gelgel Village were similar to the vegetable farmers subject in Kumasi, Ghana. Because of the same pattern every day exposed to the soil, the risk of STH infection will be higher (OR = 3.99, 95% CI: 1.15-13.86) among farmers than non-farmer subjects. According to Amoah et al. (2016), the intensity of STH infection was entirely in the mild category.

The risk factor of STH infection

Risk factors were analyzed include livestock ownership, eating self-produced vegetables, washing hands with soap, drinking water, using gloves when working, wearing footwear, wearing protective clothing, and defecating. Livestock ownership could increase the possibility of egg exposure that carried by their cattle, then human will be infected by egg or larva by ingestion or penetration (Bethony et al. 2006). Significant risk factors that influence STH infection are eating self-produced vegetables (OR = 4.4 p <0.05) and defecation site (OR = 4.7 p <0.05). The results of this study are in accordance with research conducted by Amoah et al. (2016). The similarity of the results obtained is because the sample used has similarities with this study. Rice, vegetable, and pulses farmers in Gelgel Village are the same as the vegetable farmers sampled in Kumasi Ghana, with the same pattern of eating vegetables themselves. This can be caused by the worm eggs under the leaves of vegetables and protected from sunlight, thus getting optimal conditions for infections. The habit of farmers eating raw vegetables and defecating in the river (32.3% of positive case) also increase the probability of worm eggs could infect the farmers (Amoah et al 2016)

Consuming fresh unwashed vegetables was not a significant risk factor in this study (p. 0.057), in contrary with research conducted by Anuar et al. 2014 which mentions several risk factors for STH infection in several tribes in Malaysia namely consuming raw vegetables (OR 3.36, p <0.005) and consuming contaminated fresh fruit (OR 5.19 p <0.017) (Anuar et al. 2014). In a study conducted by Jiraaankul et al. 2011, the risk factors for STH infection were walking barefoot (p <0.023) and raising cattle (p <0.001) (Jiragaankul et al. 2011). This result is also supported by research conducted by Campbell et al. 2016 which states that environmental hygiene and sanitation play an important role in the transmission of STH infections and are very important risk factor (Campbell et al. 2016). The striking behavior found in agriculture in Vietnam is the use of wastewater and the use of human waste as fertilizer (Trang et al. 2007). The prevalence of STH infections in adults, especially those working as farmers, has also been reported in Nepal, with very poor hygiene and sanitation patterns, including not using soap for handwashing and not using footwear when walking out of the house (Parajuli et al. 2014). In contrary to the results of the study by Ross et al. women were more at risk of STH infection than men, with the highest number of education being elementary and high schools. There are no differences in health conditions in subjects infected with STH, good health conditions have the same risk for STH infection compared with less healthy conditions (Ross et al. 2017).

To conclude, the significant risk factor for STH infection in this study was age, level of study, income, hand washing without soap, defecation site, not use hand gloves, not use protective clothing, unprotected foot, using fertilizer. The low prevalence of STH infection among farmers who categorized as low-income populations in Klungkung Bali must not be neglected. The prompt strategy must be made by stakeholders for eliminating the infection. Several risk factors that must be anticipated divide into personal hygiene and sanitation.

ACKNOWLEDGEMENTS

We would like to thank the Dean of The Faculty of Medicine and Health Science, Warmadewa University, Bali, Indonesia for funding this research.

REFERENCES

Amoah ID, Abubakari A, Stenstrom TA. 2016. Contribution of wastewater irrigation to soil-transmitted helminths infection among vegetable farmers in Kumasi, Ghana. PLOS Negl Trop Dis 10 (12): e0005161. DOI: 10.1371/journal.pntd.0005161.

Anuar, TS, Salleh FMD, Moktar N. 2014. Soil-transmitted helmhinct infections and associated risk factors in three Orang Asli Tribes in Peninsular Malaysia. Sci Rep 4: 4101. DOI: 10.1038/srep04101.

Apsari PIB, Arwati H, Dachlan YP. 2018. Correlation of eosinophil and basophil count with intensity of soil-transmitted helmhinct infection among farmers in Bali. JOP Conf Ser Mater Sci Eng 434:. DOI: 10.1088/1757-899X/434/1/012142.

Bethony J, Brooker S, Albonico M. 2006. Soil-transmitted helmhinct infections: *Ascarisiasis, trichuriasis*, and Hookworm. Lancet 367: 1521-1532.

Bopda J, Nana-Djenga H, Tenaugema J. 2016. Prevalence and intensity of human soil-transmitted helmhinct infections in the Akonolinga health district (Centre Region, Cameroon): Are adult hosts contributing in the persistence of the transmission? Parasite Epidemiol Control 1 (2): 199-204.

Campbell SJ, Nery SV, D’Este CA, Gray DJ. 2016. Water, sanitation and hygiene-related risk factors for soil-transmitted helmhinct and Giardia duodenals infections in rural communities in Timor-Leste. Int J Parasitol 46 (12): 771-779.

Ensink JH, Hoek WvD, Mukhtar M. 2005. High risk of hookworm infection among wastewater farmers in Pakistan. Trans R Soc Trop Med Hyg 99: 809-811.
Jiraanankul V, Wongwarit A, Mathirut M, Rommanee K, Rangsing R, Traub RJ, Piyaraj P, Naaglor T, Taamasri P, Leelayoova S. 2011. Incidence and risk factors of hookworm infection in a rural community of central Thailand. Am J Trop Med Hyg 84 (4): 594-598.

Levecke B, Behnke JM, Sitara SRA, Albonico M, Arne SM, Johannes C, Geiger SM, Hua NTV, Ngassam RJK, Kotze AC, McCarthy JS, Montesor A, Perigo MV. 2010. A comparison of the sensitivity and fecal egg counts of the McMaster Egg Counting and Kato-Katz Thick Smear Methods for soil-transmitted helminths. PLOS Negl Trop Dis 5 (6): e1201. DOI: 10.1371/journal.pntd.0001201.

Naish SJ McCarthy, Williams GM. 2004. Prevalence, intensity and risk factors for soil-transmitted helminth infection in a South Indian fishing village. Acta Trop 91: 177-187.

Parajuli RP, Fujiwara T, Umezakia M, Konishia S, Takanea E, Maharjan M, Tachibana K, Jiang HW, Pahari K, Watanabe C. 2014. Prevalence and risk factors of soil-transmitted helminth infection in Nepal. Trans R Soc Trop Med Hyg 108: 228-236.

Pham-Duc P, Nguyen-Viet H, Hattendorf J. 2013. Ascaris lumbricoides and Trichuris trichiura infections associated with wastewater and human excreta use in agriculture in Vietnam. Parasitol Intl 62: 172-180.

Ross AG, Olveda RM, McManus DP, Harn DA, Chy D, Li Y, Tallo V, Ng SK. 2017. Risk factors for human helminthiasis in rural Philippines. Int J Infect Dis 54: 150-155.

Sudarmaja I. 2011. Epidemiology of Helminthic Infection in Bali. Laboratory of Parasitology Universitas Udayana, Bali. [Indonesian]

Trang DT, Molbak K, Phung-Dac C, Dalsgaard A. 2007. Helminth infections among people using wastewater and human excreta in peri-urban agriculture and aquaculture in Hanoi, Vietnam. Trop Med Int Health 12 Suppl 2: 82-90.

WHO. 1991. Basic Laboratory Method in Medical Parasitology. 1st ed. World Health Organization, Geneva.

WHO. 2017. World Health Organization. www.who.int/intestinal_worms

Widjana DP, Sutisna P. 2000. Prevalence of Soil-transmitted Helminth infection in the rural population of Bali, Indonesia. Southeast Asian J Trop Med Public Health 31 (3): 454-459.