

HEALTHY BIRTH, GROWTH & DEVELOPMENT



Swiss Tropical and Public Health Institute Schweizerisches Tropen- und Public Health-Institut Institut Tropical et de Santé Publique Suisse

Identification of Causal Pathways Determining the Relation Between Pathogen-Specific Infection and Impaired Growth in Children Aged ≤ 59 Months in Mirzapur, Bangladesh

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Objectives

Burden of childhood diarrhea and malnutrition remain high in South Asia due to inadequate household sanitation, lack of access to improved water, and poor hygiene practices

We aimed to:

Determine causal pathways linking household

factors, enteric pathogen infections, and impaired growth in children residing in rural communities of Bangladesh

 Identify factors and pathways that are critical points in gastrointestinal parasite transmission pathways and childhood stunting

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Fig. 1 Healthy Birth Growth and Development Lifecycle diagram.

Methods

- Structural Equation Models (SEM) approach used to evaluate directed dependencies among drivers of growth impairment among Bangladeshi children
- Stool collected from case and matched control children enrolled in the Bangladesh component of Global Enteric Multicenter Study (GEMS) screened for bacterial, viral, and protozoan pathogens
- Children's height measured at enrollment
- Information was collected about household water, sanitation and hygiene practices, handling of animal and child feces, maternal education, and water treatment and storage
- Paths specifying direct and indirect effects of household reservoirs and hygiene behaviors on enteric infections and childhood stunting (HAZ < -2) were evaluated using SEM



	Direct Effect	Indirect Effect	Full Effect
→Stunting	coefficient	coefficient	coefficient
G. lamblia co-infection	0.34	-0.28	0.06
Cryptosporidium infection	-0.37	0.00	-0.37
Children's age	0.02	0.00	0.02
Interaction: Cryptosporidium infection X	0.03	0.00	0.03
children's age			
Possess dog	0.17	0.00	0.17
Possess goat	0.17	0.00	0.17
Tile or concrete floor	-0.30	-0.15	-0.45
Possess refrigerator	-0.64	0.00	-0.64
Mash hand hafaya nunsing shild	0.00	0.01	0.01
Wash hand before nursing child	0.00	-0.01	-0.01
washinanu alter handling child	0.00	-0.11	-0.11
Caretaker education	-0.50	-0.12	-0.62
How child's feces disposed	0.00	-0.41	-0.41
Interaction: Caretaker education X How	0.00	0.43	0.43
child's feces disposed			
Animal dung used for fuel	0.00	-0.29	-0.29
Hand wash before eating	0.00	-0.27	-0.27
Interaction: using animal dung for fuel for	0.00	0.41	0.41
cooking X hand wash before eating			
Hand wash before cooking	0.00	0.41	0.41
Improved latrine use	-0.56	0.16	-0.40
	0.00	0.10	0110

 Direct, indirect, and overall effects of model variables were calculated using coefficients from best-fitting model

	child		Ĵ	J	_	
L						

Figure 2. Household factors are risk factors for childhood stunting through direct pathways or effects on *Cryptosporidium* and *Giardia lamblia* infections

Interaction: Latrine X hand wash before	0.00	-0.48	-0.48
cooking			

Direct, indirect, and full effects of household pathogen reservoirs, hygiene behaviors, and parasite infections on stunting

Results

- Household factors were risk factors for childhood stunting through direct pathways or effects on intestinal parasite infection
- Giardia lamblia and Cryptosporidium infections were associated with stunting with increased child age
- Dogs or goats directly associated with increased stunting; household refrigerators or non-dirt floors associated with reduced stunting
- Cow dung fuel use, when caretakers reported no handwashing before eating, was associated with increased *Cryptosporidium* prevalence
- Traditional latrine associated with increased G.
 lamblia and Cryptosporidium infections when caretakers handwashed before cooking
- Increased caretaker education reduced stunting



directly, but no education increased stunting through *Cryptosporidium* infection when child feces disposal

infection	infection			
Cryptosporidium infection	-0.37	0.00	-0.37	
Children's age	0.02	0.00	0.02	
Interaction: Cryptosporidium	0.03	0.00	0.03	
infection X children's age				

Figure 3. *Cryptosporidium* infection increases the risk of stunting with increasing age of child

— No fuel dung use — Fuel dung use

Animal dung used for fuel	0.00	-0.29	-0.29
Hand wash before eating	0.00	-0.27	-0.27
Interaction: using animal dung	0.00	0.41	0.41
for fuel for cooking X hand wash			
before eating			

Figure 4. *Cryptosporidium* infection increases with cow dung fuel use and no handwashing before eating

No child leces disposal	child leces disposal			
Caretaker education	-0.50	-0.12	-0.62	
How child's feces disposed	0.00	-0.41	-0.41	
Interaction: Caretaker	0.00	0.43	0.43	
education X How child's feces				
disposed				

Figure 5. Caretaker education had greatest effect on stunting through direct and indirect pathways

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References

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Conclusions

Risk of stunting

 Analysis identified factors that are critical points in gastrointestinal parasite transmission pathways and childhood stunting in rural Bangladesh

 Identified pathways involve different human and animal pathogen reservoirs that are modified by specific hygiene practices and behaviors

•Findings suggest that WASH interventions concerned with reducing childhood stunting in Bangladesh should include efforts to limit exposure to animal sources of pathogens

 Models with further testing can be important tool in efforts to reduce burden of stunting through targeting of households and communities using indicators of exposure risk