Intestinal schistosomiasis in Oman, caused by *Schistosoma mansoni*, is isolated to the Dhofar Governorate area and considered almost eliminated with an estimated prevalence <0.01% [1,2]. The first autochthonous case was detected in 1979 [1]. Ministry of Health control began in 1983 through the 1990’s when very low prevalence was achieved. Efforts towards elimination began in 2003 with a 5-year program. Currently, Oman is considered non-endemic except within the Dhofar Governorate, where populations of *Biomphalaria pfeifferi* - the snail intermediate host for *Schistosoma mansoni* - are found. *Bulinus globosus*, the snail intermediate host for *Schistosoma haematobium*, has been detected in the area as well but only *S. mansoni* is known to have been historically endemic [3]. Schistosomiasis control began in 1983 when the Ministry of Health initiated a strategic elimination campaign that focused on snail control using chemical molluscicides, environmental improvements, health education, and active test-and-treat for human infections [3].
All water bodies found with *Biomphalaria pfeifferi* snails, mainly in the mountainous areas, were treated with molluscicide. Spraying continued based on snail density, human-water contact and risk of infection. Transmission sites received potable water access and public toilets. Health education existed in affected communities, but illiteracy represented a challenge to spreading awareness of the disease. Schoolchildren between 6 and 17 years of age and individuals coming to Oman from endemic countries were screened for test-and-treat case detection [3]. By the 1990’s, only 0-2 cases per year were detected. However, infection was still detected among expatriate workers from nearby endemic areas in Africa.

### Rigorous Control in Dhofar

Schistosomiasis is endemic to the Dhofar Governorate province in southern Oman. It is declared non-endemic in all other regions of Oman.

### Recent Control Efforts

A 5-year program towards elimination in the Dhofar was initiated in 2003. Interrupting transmission was to be achieved by active detection and treatment of cases, mass chemotherapy in communities with prevalence greater than 25% in school-aged children, snail control, and addressing the possibility of control in rodent populations [3]. As of 2010, prevalence is <0.01% [2].

### References