

**Methods:** This cross sectional door to door surveys carries out the assessment of health status and needs in nonsystematic approach. The survey was designed to describe health problems of migrating homeless marginalized community and to identify inequalities It was conducted by volunteers group and Government funded NGOs working for improvement of the health of this set of community from November, 2012 to January, 2013.

A non-probability mode sample of 877 persons was interviewed from the following sites-Kalakaji flyover, JNU campus construction site, Hauz Khas village slum dweller, Munirka night shelter, Kusum Pahari slum.

**Results:** 24% morbidity (n=210) was recorded. In children, upper respiratory infections (34%) were commonest of morbidities followed by pain in abdomen (28%) and malnutrition /anemia (20%). Other morbidities like tuberculosis, eye & ear infections and congenital defects comprised 18% of the morbidities. In adults, joint pain & nonspecific body aches (30%), indigestion & acidity restlessness, irritation anxiety (34%), loss of vision (8%) headache (7%), anemia (6%) ruled the chart. Most of the mental problems like stress, anxiety, restlessness, irritation were present and 67% of the participants were alcoholics. At each of the sites, there were 2-3 young alcoholic males (20-30 years old) who presented with severe jaundice and liver failure. At all the sites we observed that liquor, ganja, tobacco chewing, bidi smoking were common addictions among male members and widely practiced.

**Conclusions:** A huge gap in knowledge attitude and practices in health literacy and health services was identified in migrant construction sites workers and homeless. Availability of Alcohol and other addictive agents needs to be restricted at such sites. There is a need for regular mobile health services, education and counseling help for better health of such migratory population.

**Conflict of Interest:** None

362

### **Ethnopharmaceuticals for the Treatment of Old World Cutaneous Leishmaniasis: A Systematic Review**

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**Background:** Toxicity, expense, and accessibility limit treatment success in Old World genus *Leishmania* found in the Middle East, Mediterranean basin, Arabian Peninsula, Africa as well as the Indian Subcontinent. Better drugs are urgently needed, however, drug discovery is hampered by limited funding given burden of highly endemic OWCL mostly to LMICs. Plant-based compounds with potential anti-leishmanial effects found in and around local endemic communities present an opportunity to overcome the aforementioned therapeutic challenges, and many such interventions are supported by anecdotal evidence of efficacy.

**Objectives:** We aim to synthesize existing evidence around available ethnopharmaceuticals to promote drug discovery for the prevention and treatment of OWCL.

**Methods:** Five electronic databases were searched. The Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) will be implemented. Further data extraction will be performed by two reviewers and the quality of the articles will be critically evaluated using the Grading of Recommendations Assessment, Development, and Evaluation (GRADE) approach. A total of 7662 articles were retrieved. Titles, abstracts, and full-text articles are in the process of being systematically double screened by two reviewers with a tertiary arbitrator. As of right now, 828 studies have been assessed for full-text eligibility and statistical analysis has been performed on 5 papers.

**Results:** 13 studies were included evaluating a number of topical applications of ethnopharmaceuticals including: *Buca* (Mat lippie), *Cassia fistula*, Z-HE, *Juniperus excelsa*, honey, *Achilles millefolium*, ozonated olive oil, *Sambucus ebulus*, garlic, *Azadirachta indica*, *Acacia nilotica*, *Physalis minima* and *Morinda citrifolia*. Eight (62%) studies were RCTs, 3 (23%) studies were cohorts and 2 (16%) studies were from patents. *C. fistula* gel was the most studied extract, evaluated in addition to Glucantime therapy, where topical gel resulted in complete cure [RR = 1.62 (1.17-2.24)].

**Conclusions:** Synthesizing the current evidence surrounding ethnopharmaceuticals for the treatment of OWCL may contribute to drug discovery pipelines and potentially lead to novel therapeutics in a field that has not seen any new drug development for over half a century.

363

### **A Systematic Review of Kidney Solid Organ Transplantation in Acute Presentations of Tropical Infectious Diseases**

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**Background:** Fulminant life-threatening presentations of acute tropical infections may occur, and the degree of end-organ impairment may qualify patients for kidney solid-organ transplantation (SOT). However, there is a knowledge gap around indications for and outcomes in kidney SOT for severe acute tropical infectious diseases.

**Objectives:** We aim to synthesize such knowledge, focusing on patient outcomes.

**Methods:** Five electronic databases were searched. The Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) will be implemented. Further data extraction will be performed by two reviewers and the quality of the articles will be critically evaluated using the Grading of Recommendations Assessment, Development, and Evaluation (GRADE) approach. A total of 7662 articles were retrieved. Titles, abstracts, and full-text articles are in the process of being systematically double screened by two reviewers with a tertiary arbitrator. As of right now, 828 studies have been assessed for full-text eligibility and statistical analysis has been performed on 5 papers.

**Results:** All 5 papers diagnosed malaria in patients. Statistical analysis demonstrates that the most common etiologic pathogens in synthesized papers of patients undergoing kidney SOT are *Plasmodium falciparum* and *Plasmodium vivax*. An analysis of patient outcomes shows that 60% of patients survived after kidney SOT.

**Conclusions:** Malaria due to *P. falciparum* or *P. vivax* are the most well represented pathogens causing acute tropical infections requiring kidney SOT. The full data set will be summarized to systematically map published literature that will illuminate the frequency, indications for, and health outcomes of kidney SOT recipients in the treatment of acute tropical infectious diseases. Where kidney SOT capacity exists, alongside the occurrence of endemic or imported tropical infectious diseases, such synthesized information is essential for resource allocation and informed clinical decision-making.

364

### **Treatment of Schistosomiasis in Pregnancy: A Systematic Review of Fetal and Infant Outcomes**

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**Background:** Parasitic infections in pregnancy necessitate considerations of numerous factors, including the potential developmental outcomes for the fetus and newborn. For these considerations, a substantial knowledge gap exists in schistosomiasis, with few published and authoritative resources to guide clinical decision-making.

**Objectives:** We aimed to map the available literature regarding the safety of intestinal schistosomiasis treatments during pregnancy for fetal and infant development.