Dr. Evans Chadeka is a Postdoctoral Research Fellow at the KEMRI Graduate School of Health Sciences. Recently, Dr. Chadeka was awarded a Career Development Fellowship grant from the European Developing Countries Clinical Trials Partnership (EDCTP) for his project on identifying potential morbidity markers for intestinal schistosomiasis/bilharzia. The project is part of the EDCTP2 programme supported by the European Union (grant number TMA2019CDF-2746).

EDUCATION QUALIFICATION

PhD in Medical Science in Infection Research
Nagasaki University, Japan: March 2019

Master of Public Health (MPH)
Moi University, Kenya: December 2010

Bachelor of Science (Microbiology)
Jomo Kenyatta University of Agriculture and Technology, Kenya: July 2005

FIELD OR AREA OF SPECIALIZATION
Dr. Chadeka is interested in multidisciplinary approaches that integrate epidemiological advances in pursuit to contributing to NTDs control among the most vulnerable in the society.
SELECTED PUBLICATIONS


RESEARCH PROJECTS AND INTERESTS

Project Title: Intestinal Schistosomiasis in preschool and school children residing along shores and on islands of Lake Victoria western Kenya: Investigation of eosinophil cationic protein and fecal occult blood as potential markers for schistosomiasis induced bowel morbidity

PI: Dr. Evans Chadeka

Donor/Funder: EDCTP – European and Developing Countries Clinical Trials Partnership

Reference: TMA 2019 CDF – 2746

Duration: November, 2020 – October 2023

Summary of the Project

Schistosomiasis control programs are majorly school-based and aim at relieving schistosomiasis related morbidity through preventive chemotherapy (PC). Early adequate treatment with praziquantel (PZQ) shows a reversal of symptoms and relief of severe morbidity development. Growing evidence indicates preschool children are equally at schistosomiasis risk and can benefit from the control programs. WHO therefore advocates for schistosomiasis morbidity control interventions in preschool-children. There is, therefore, need to have simple tools which can be used to assess the impact of such control programs upon the disease.

Eosinophil cationic protein (ECP), a basic protein found in eosinophil granulocyte is increasingly being used as a marker of bowel inflammation. Fecal occult blood (FOB) is also a reliable indicator of bowel morbidity. The proposed study aims to investigate the potential use of ECP and FOB as proxy markers of Schistosoma mansoni infection induced intestinal morbidity before and after treatment with praziquantel. A cohort of preschool-children (<5 years) and schoolchildren (9-14 years). The study is in Mbita sub-county, along the shores and on the islands of Lake Victoria, Homa Bay county, Kenya. At the baseline, the children will be examined for S. mansoni infection. Following examination at baseline, all positive cases will be treated with praziquantel 40 mg/kg body weight. A second treatment will be conducted 6 weeks post the initial treatment. The two dose treatment will be repeated 6 months, 12 months and 18 months’ post baseline in any positive cases. Additionally,
examination and treatment of soil transmitted helminths together with malaria will be conducted. Point of Care hemoglobin, FOB and ECP assays will be done at all-time points. Associations between test results and *S. mansoni* infection will be analyzed using logistic regression.

The findings from this study will inform on the potential use of FOB and ECP as surrogate markers of *S. mansoni* infection induced bowel morbidity.

This project (**TMA2019CDF-2746**) is part of the EDCTP2 programme supported by the European Union.