

To date, there has been no review of practice guidelines used in cholera prevention and control programmes.

Systematic search through international agency websites to identify WASH intervention guidelines used in cholera programmes in endemic and epidemic settings.

Recommendations listed in the guidelines were:

1. Extracted
2. Categorised according to predefined WASH intervention criteria
3. Analysed for consistency and concordance
4. Classified whether the interventions targeted within-household or community-level transmission (Figure 1)

Figure 1: Human-to-human and environment-to-human transmission routes

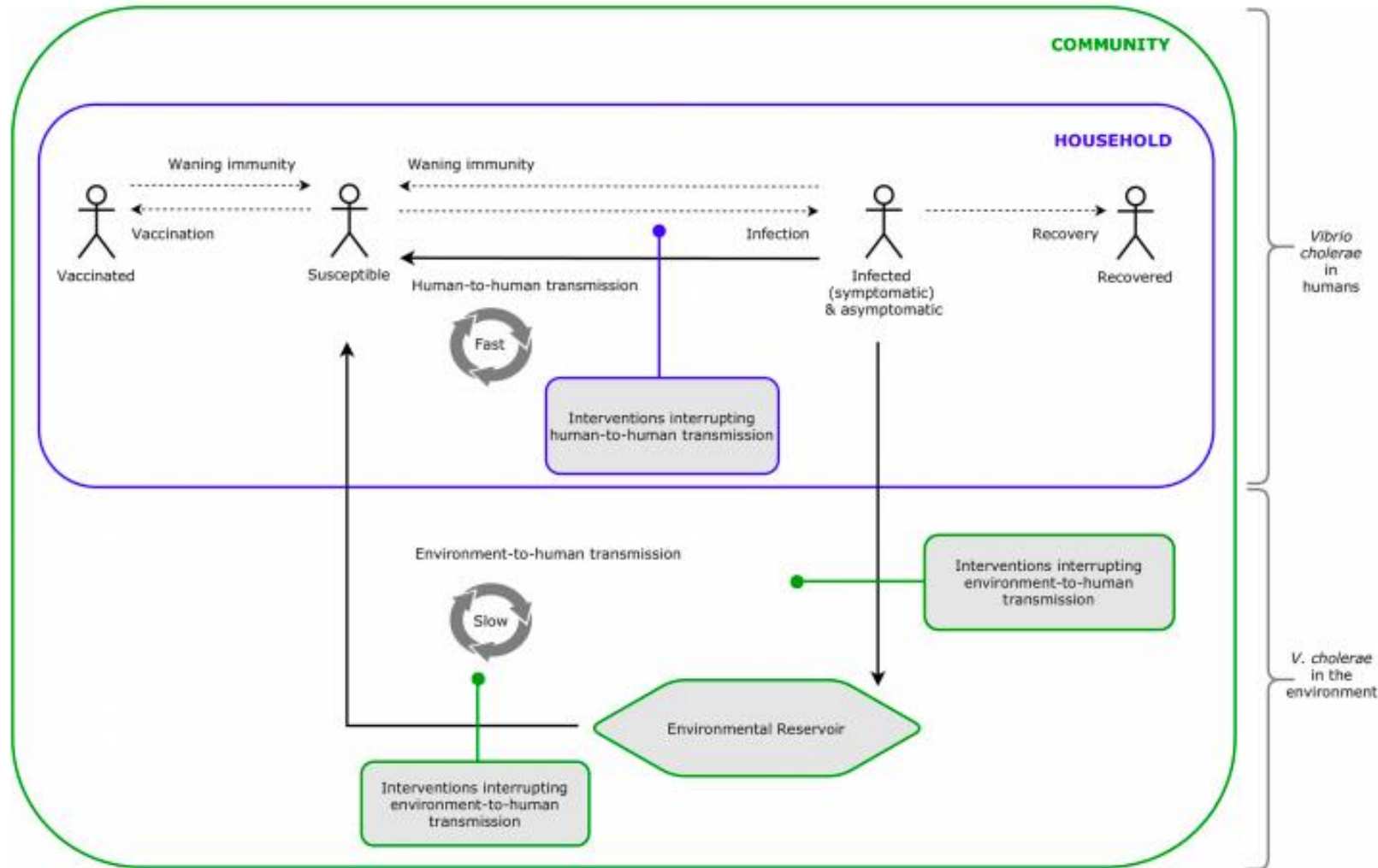
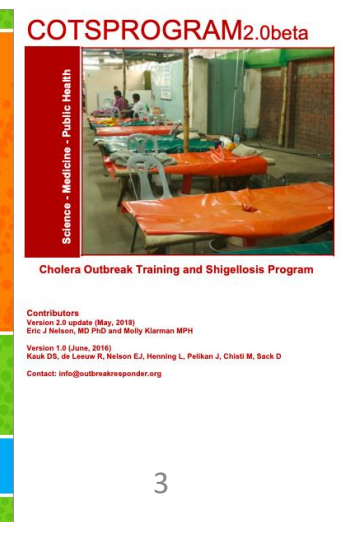
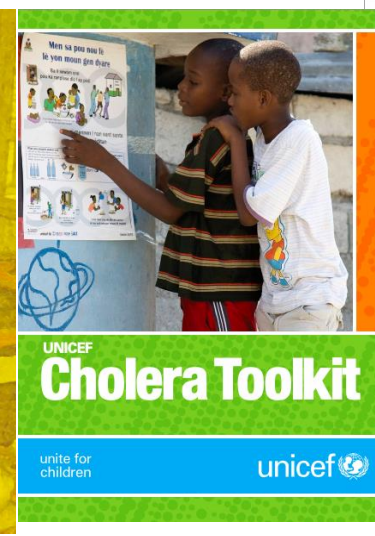
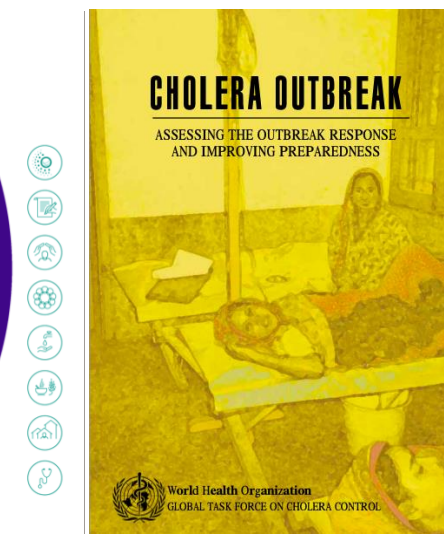
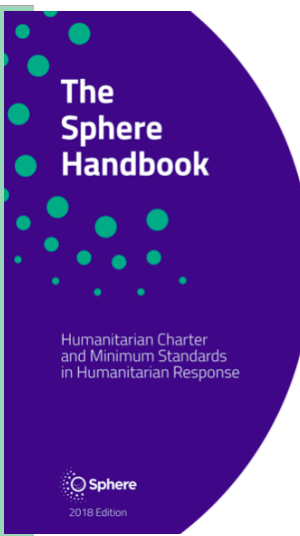
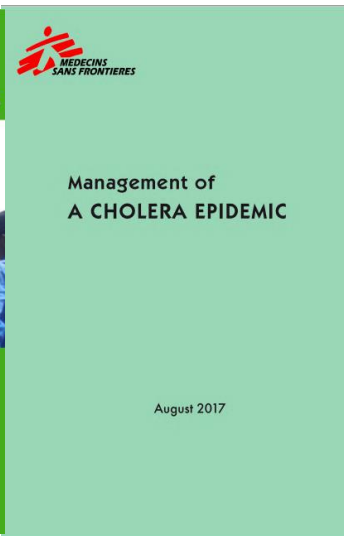
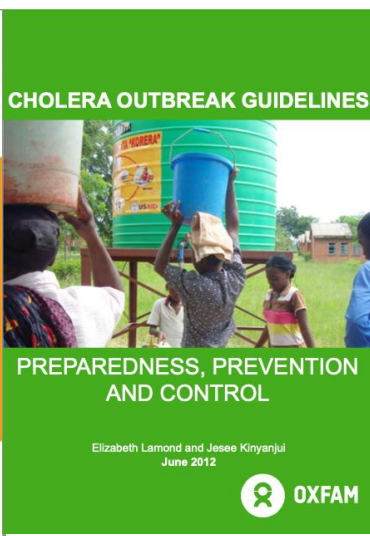
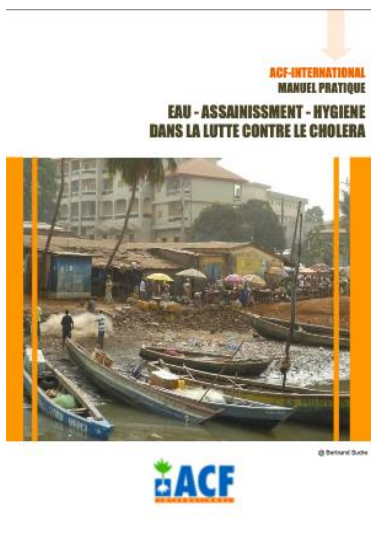


Fig 1. Conceptual framework of cholera transmission within the household and at the community-level: incorporating the human-to-human and environment-to-human pathways of transmission (adapted from recent models [27, 43, 45, 61]).

- 8 international guidelines included:
 - 3 by NGOs: Oxfam 2012, ACF 2013, MSF 2017
 - 1 from NPO: Sphere 2018
 - 3 from multilateral organisations: WHO 2004, UNICEF 2013 and GTFCC 2019 (pre-press copy)
 - 1 from a research institution: ICDDR'B 2018



- **95 distinct** recommendations identified
- **All categories of WASH interventions** were featured in the guidelines.
- **Consistency and concordance** among guidelines was **poor**.
- **6 interventions** were explicitly **not recommended** for cholera control and all involved the use or distribution of chemicals

Results

- Most recommendations targeted community-level transmission (45%)
- 35% targeted within-household transmission
- 20% both.

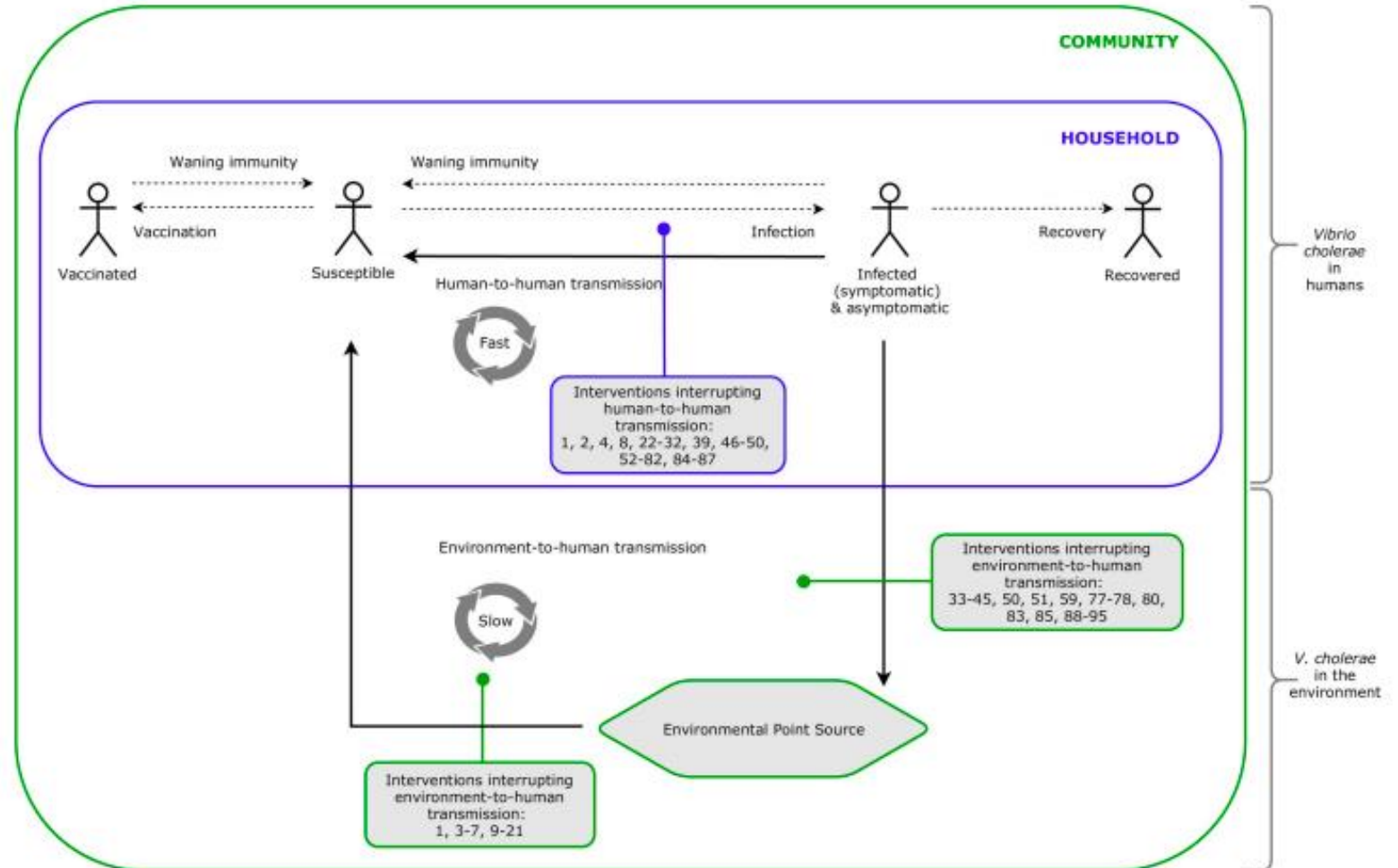


Fig 3. 95 recommended WASH interventions found across eight current international guidelines mapped to the conceptual framework of cholera transmission within the household and at the community-level.

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- 8 international guidelines for cholera prevention and control are in current use; however, the concordance among the WASH recommendations in these guidelines was relatively low.
- No single guideline included all recommendations or collated all available guidance.
- Interpretation of the guidelines may be difficult particularly where recommendations are omitted or contradict one another
- Guidelines should more explicitly consider strength of evidence, efficiency and feasibility criteria when recommending different candidate WASH interventions.

Recommendations

1. For cholera control, WASH interventions need to be targeted to household-level and community level for prevention
2. Limiting the number of guidelines available and compiling fewer, more focused recommendations
3. Providing greater specificity in the language used in recommendations, e.g. specifying the timing of response, coverage required, minimum levels of service and modality of delivery (e.g. location, population group);
4. Publishing or improving access to programme evaluations and practice literature to strengthen the evidence base for guideline development
5. Standardising approaches in guideline development to consider the evidence base, from studies, programme evaluations or models, when deciding which interventions to recommend

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Questions

Full publication:

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