



**DEMOGRAPHIC AND SOCIOECONOMIC  
CHARACTERISTICS OF ADULTS WITH  
NEUROCYSTICERCOSIS-ASSOCIATED  
EPILEPSY AT THE UNIVERSITY  
TEACHING HOSPITAL IN LUSAKA,  
ZAMBIA.**

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# Introduction

- Neurocysticercosis (NCC) is a helminthic infection caused by the tapeworm *Taenia solium*.
- It is a leading cause of acquired epilepsy, yet diagnosis and treatment remain challenging.
- Several studies have investigated NCC among rural populations in Zambia, but few have targeted urban areas.

# Aim



To describe the demographic and socioeconomic characteristics of adults with and without NCC-associated epilepsy at the University Teaching Hospital (UTH) in Lusaka.

# Methodology



***Study design:*** A cross-sectional case-control study

***Study site:*** University Teaching Hospital

***Sample size:*** 141 participants



# Methodology

**Sampling method:** Consecutive sampling

**Case:** Untreated NCC confirmed by neuroimaging

**Control :** Non-NCC focal epilepsy diagnosed within 6 months

**Data collection tool:** Interview-guided questionnaires were used to collect data from December 2021 to April 2024

**Data analysis:** Quantitative analysis

**Ethical consideration:** Ethical clearance and permission was sought from UNZABREC and NHRA

# RESULTS AND DISCUSSION



**TABLE 1: DEMOGRAPHIC CHARACTERISTICS**

Characteristics	Overall n=141	Cases n=79	Controls n=62	p-value
<b>Male sex</b> , n(%)	95 (67)	62 (79)	33 (53)	<b>0.002</b>
<b>Age in years</b> , median (IQR)	41 (32,52)	38 (30,48)	45 (36,63)	<b>0.001</b>
<b>Occupation</b> , n(%)				
Unemployed	34 (24)	19 (24)	15 (24)	n.s
Trader	26 (18)	19 (24)	7 (11)	
<b>Level of Education</b>				
None	4 (3)	2 (3)	2 (3)	n.s
Primary	31 (22)	17 (22)	14 (23)	
Secondary	72 (51)	39 (49)	33 (53)	
Tertiary	32 (23)	20 (25)	12 (19)	
<b>Living with HIV</b> , n (%)	31/107 (29)	13/60 (22)	18/47 (38)	

**Note:** Epilepsy risk factors were low in both groups, the highest being family history at 17%

# RESULTS AND DISCUSSION



**TABLE 2: SOCIOECONOMIC CHARACTERISTICS**

Characteristics	Overall n=141	Cases n=79	Controls n=62	p-value
<b>Pork consumption</b> , n (%)	108/139 (78)	65/78 (83)	43/61 (71)	<b>0.01</b>
<b>Frequent* pork consumption</b> , n (%)	91/137 (66)	56/75 (75)	35 (56)	<b>0.025</b>
<b>Pork source</b> , n (%)				
Corner shop	34/108 (31)	24/65 (37)	10/43 (23)	<b>&lt;0.01</b>
Informal meat sellers	53/108 (49)	34/65 (52)	19/43 (44)	<b>0.005</b>
<b>Water purification</b> , n(%)				
None	71 (50)	44 (56)	27 (44)	<b>&lt;0.01</b>
Water filtration	16 (11)	4 (5)	12 (19)	<b>&lt;0.01</b>
<b>Alcohol consumption</b>	47 (59)	24 (39)	23 (37)	n.s

**Note:** Majority in both groups used piped water (78%) and used either a flush-toilet (46%) or pit latrine (34%), consumed pork more than once a month.



# CONCLUSION

- Adults with NCC were predominantly young males with higher exposure to NCC risk-factors such as higher pork consumption from community sellers, drinking untreated water and higher alcohol consumption.
- However, other factors such as drinking water sources, toilet type and occupation were similar between groups.
- Further investigation is recommended to identify community-based preventive measures and understand reasons for the male preponderance of NCC.





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