

Management of Febrile Illness Cases among under 5 years in Selected Primary
Healthcare Centers in Ibadan, Oyo State, Nigeria

Oyetunde Timon OYEBAMI
LCU/PG/001965

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Medical and Applied Sciences, Lead City University, Ibadan, Oyo State, Nigeria.

In Partial Fulfillment of the Requirements for the Award of Master Degree (Mph) in
Public Health

Certification

This is to certify that Oyebami Oyetunde Timon with matriculation number LCU/PG/001965 carried out this research work titled “Management of Febrile Illness Cases in selected Primary Healthcare Centers in Ibadan, Oyo State, Nigeria” in the Department of Public Health, Faculty of Basic Medical and Health Sciences, Lead City University, Ibadan, Oyo state, for the award of Master Degree in Public Health and that this has not been previously submitted.

Dr. Salako Abideen

21-11-2022

(Supervisor)

Dr. T.A Olowolafe

21-11-2022

(Head of the Department)

Dedication

This research work is dedicated to my lovely wife (Oyebami Olusola Omoyemi) who has single-handedly turn herself to my research assistant and also for keeping the family together when the task was so enormous.

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“Even though the above-mentioned institutions and persons have assisted in the process of this research work, I alone stand responsible for the errors, if any, found in the work”

Abstract

Management of febrile illness cases is one of the major cases seen and attended to at various level of health care facilities ranging from primary, secondary, and tertiary health facilities with Nigeria context, this has been guided by development, dissemination and distribution of national guidelines to health care workers at all levels of health facility. At selected Primary Healthcare Centres in Ibadan, Oyo State, Nigeria, 250 self-administered and pre-designed questionnaires were distributed to various health care professionals involved in the management of febrile patients at the primary healthcare level. The study questionnaire was divided into four sections. All questions were simple and straightforward, both open-ended and closed-ended. After consent given, questions were answered. The categories of health care providers were highest with Community health extension workers (CHEW) 62.8%, The categories of HCs covered were highest with Primary health care facility (92.4%) and lowest in Community health officer (11.6%). The results of this study showed that each health facility employee used one type of testing or another to identify the etiological agent causing the febrile illness. The most common method used was mRDTs (74.8%). The lack of some basic facilities like access to the internet, has affected the adoption and application of the treatment guidelines in the management of febrile diseases among children under the age of five in Ibadan, Oyo State, Nigeria. The study demonstrated that FMOH, Abuja authorized policy on management of febrile illness, including sufficient diagnostic processes before treatment, serves as a guide for medical staff at Nigeria's basic health institutions.

Keywords: Treatment guidelines, Community health extension workers, Management of febrile illness, Primary healthcare Centres, Rapid diagnostic test, Etiological agent

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List of Acronyms

Abbreviation	Meaning
U-5	Under 5
PMI	President Malaria Initiative
MSH	Management Science for Health
PHC	Primary Healthcare Centre
mRDT	Malaria Rapid Diagnostic Test
CHEW	Community Health Extension Worker
FMOH	Federal Ministry Of Health
WHO	Who Health Organization
RDT	Rapid Diagnostic Test
IMCI	Management of Childhood Illness
IMAI	Management of Adolescent and Adult
ICCM	Integrate Community Case Management
LGAs	Local Government Areas
FIRES	Fever Infection related epilepsy
syndrome	
ITNs	Insecticide-treated nets
ADH	Alpha-melanocyte stimulating hormone
CRF	Corticotropin-Releasing Factor
CNS	Central Nervous System
DALYs	Disability-Adjusted Life Years
IHME	Institute for Health Metrics & Evaluation

IMCI	Management of Childhood Illness
IMAI	Management of Adolescent & Adult
Illness	
iCCM	Integrate Community Case Management
ITNs	Insecticide-treated nets
ADH	Alpha-melanocyte stimulating hormone
CRF	Corticotropin-releasing factor
CNS	Central nervous system
DALYs	Disability-adjusted life years
IHME	Institute for Health Metrics & Evaluation
HIV	Human immunodeficiency virus
TB	Tuberculosis
LPS	Lipopolysaccharides
IL	Interleukins
INF	Interferon gamma,
CNTF	Ciliary neurotropic factor
TNF	Tumour necrosis factor
PAMPS	Pathogen associated molecular patterns

TLR-4	Toll-like receptors 4
PGE2	Prostaglandin E2
PFPF	Preformed Pyrogenic Factors
QC	Chloroquine
SP	Sulphadoxine/pyrimethamine
MCE	Multi-Country Assessment
ACT treatments	Artemisinin-based combination
AUFIs	Acute undifferentiated febrile illnesses
POC	Point Of Care
(IMAI) Illness	Management of Adolescent & Adult
(LFTs)	Lateral Flow Tests
RSV	Respiratory Syncytial Virus
CRP	C reactive protein
GPs	General practitioners
FSSN	Fever Sentinel Surveillance Network
DLS	Dengue-like syndromes

CDC

Disease Control and Prevention

JEV

Japanese encephalitis virus

HTD

Hospital for Tropical Diseases

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