

Intestinal worms

People sometimes get worms in their large intestine, and this is especially so in the case of children. The most common worms are between 0.5 and 1 cm long. More rarely, you can get very fine worms, like a white thread, about 3 cm long.

Intestinal worms are very commonplace; they are fairly harmless and the treatment is simple. They are not connected with personal hygiene.

The main discomfort that they generally cause is itchiness in the area around the anus, which may be intense, especially at night (because this is when the worms go out to the anal skin to lay their eggs). They can also cause itchiness in the area around the vagina.

Some children may feel restless or irritable, wake up during the night and have nightmares, or even sleepwalk, but there is no proof that worms cause teeth grinding, abdominal pain or poor appetite, insufficient weight gain, anaemia or hyperactivity.

Wounds can often be seen due to the area being scratched.

How do you catch worms?

As the area around the anus itches a lot, children scratch it with their hands; then they put their contaminated hands in their mouth and so swallow the eggs, which hatch in the intestine again and become the new generation of worms.

The eggs can also be passed on by touching other people, food or objects.

How are they diagnosed?

Small worms can often be seen in the area around the anus or vagina, or in the stools.

If none have been seen and your doctor is not sure, he or she may ask you to do a test. This involves placing clear tape on the skin around the anus in the morning before washing or going to the toilet. Then the tape is placed on a glass slide provided for the purpose and taken to the health centre. The tape can be examined under a microscope for the presence of any eggs that have stuck to it.

Intestinal worms are not always evacuated in the stools. This is why a stool test is not usually carried out directly.

How are worms treated?

The medication prescribed by your doctor or paediatrician should be taken. Usually it involves a single dose, which is repeated 1-2 weeks later. If it is an isolated case, only the patient affected is treated; if there are more members of the family with symptoms or siblings that have baths together, they should also be treated.

In case of relapse, all those living in the same home should be treated. They will be treated at the same time.

It is important to wash your hands well and scrub your fingernails thoroughly after going to the toilet. We recommend using hot water to wash bedding, towels and underwear, and eating foods with a laxative effect (vegetables, plums, kiwis, etc.) to help eliminate the worms.

Sometimes an all-in-one pyjama can be useful for stopping children from scratching themselves while the treatment is taking effect.



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