Uganda

COUNTRY GENERAL INFORMATION (WHO, 2015)

- Total population: 39,032,000
- Gender F /M (%): 50 / 50
- Population, age group <15/ ≥15 years (%): 48 / 52
- Life expectancy at birth (F/M, years) (2015): 64/ 60
- GDP (PPP int $): 1,771
- Income status: Low
- Number of 3rd sub-national administrative level divisions, name: 146, County

EPIEMIOLOGY

- Endemicity status: VL = Endemic; CL = Non endemic; PKDL = Non endemic; MCL = Non endemic

<table>
<thead>
<tr>
<th>Endemicity status</th>
<th>VL</th>
<th>CL</th>
<th>PKDL</th>
<th>MCL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of new cases (incidence):</td>
<td>140</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Number of relapse* cases:</td>
<td>4</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Total number of cases:</td>
<td>144</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Imported cases [# , %]:</td>
<td>101, 72%</td>
<td>0, 0%</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Gender distribution [% F]:</td>
<td>24</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Age group distribution [% , &lt; 5/5-14/&gt;14]:</td>
<td>(10/57/33)</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Incidence rate (cases/10,000 population in endemic areas):</td>
<td>No data</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Number of endemic 3rd sub-national administrative level divisions:</td>
<td>52</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Population at risk* [% , # at risk/total population]:</td>
<td>No data</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Was there any outbreak?</td>
<td>Not available</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Number of new3 foci:</td>
<td>Not available</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

N/A = Not applicable; * Relapse in this country is defined as: “A patient who successfully completed treatment and with negative clinical and parasitological test of cure, but showed evidence of VL (clinical and parasitological) within 6 months of completion of therapy”; ** Defined as “Number of people living in 3rd sub-national administrative level endemic areas”; *** Defined as “In this reporting period, an area at the 3rd sub-national administrative level reporting cases for the first time ever”; * Sociodemographic information has been provided for new cases.

Monthly distribution of cases* (January-December)

<table>
<thead>
<tr>
<th>Year</th>
<th>JAN</th>
<th>FEB</th>
<th>MAR</th>
<th>APR</th>
<th>MAY</th>
<th>JUN</th>
<th>JUL</th>
<th>AUG</th>
<th>SEP</th>
<th>OCT</th>
<th>NOV</th>
<th>DEC</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>16</td>
<td>17</td>
<td>10</td>
<td>6</td>
<td>8</td>
<td>12</td>
<td>16</td>
<td>18</td>
<td>8</td>
<td>11</td>
<td>5</td>
<td>15</td>
</tr>
<tr>
<td>2015</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

VL = visceral leishmaniasis; CL = cutaneous leishmaniasis; PKDL= post-kala-azar dermal leishmaniasis; MCL = mucocutaneous leishmaniasis
* Monthly data for VL includes both new and relapse cases

Incidence rate/10,000 (at the national level) and number of new cases from 1998 to 2015
Disease distribution of new VL and CL cases at locality level per 10,000 population (2015)

Visceral leishmaniasis

Number of people screened actively for: 178
Number of people screened passively for: 372
Cases diagnosed by RDT* (%, # RDT+/ total VL cases): 100% (144/144)
Cases diagnosed by direct exam* (parasitology) (%, # slides + / total cases): 88% (126/144)
Cases diagnosed clinically* (%, # clinical cases/ total cases): 9% (13/144)
Proportion of CL cases with lesions equal to or greater than 4cm*: N/A
Proportion of CL cases with 4 or more lesions*(%, # CL cases/ total CL cases): N/A
Percentage of cases with HIV coinfection*: 0% (0/140)

Cutaneous leishmaniasis

Not endemic for CL

CONTROL AND SURVEILLANCE

Year Leishmaniasis National Control Programme (LNCP) was established: Not available
Type of surveillance: Integrated
Is there a vector control programme? No
Type of insecticide used for Indoor residual Spraying (IRS): N/A
Year latest national guidelines: Not yet published
Is leishmaniasis notifiable (mandatory report)? No
Is there a reservoir host control programme? No
Number of leishmaniasis health facilities: 1

DIAGNOSIS

Number of people screened actively for:
- VL: 178
- CL: N/A
Number of people screened passively for:
- VL: 372
- CL: N/A
Cases diagnosed by RDT* (%, # RDT+/ total VL cases):
- VL: 100% (144/144)
- CL: N/A
Proportion of positive RDT* (%, # RDT+/total RDT):
- VL: 26% (144/555)
- CL: N/A
Cases diagnosed by direct exam* (parasitology) (%, # slides + / total cases):
- VL: 88% (126/144)
- CL: N/A
Proportion of positive slides* (%, # slides + / total slides):
- VL: 66% (126/190)
- CL: N/A
Cases diagnosed clinically* (%, # clinical cases/ total cases):
- VL: 9% (13/144)
- CL: N/A
Propportion of CL cases with lesions equal to or greater than 4cm*: N/A
Propportion of CL cases with 4 or more lesions*(%, # CL cases/ total CL cases): N/A
Percentage of cases with HIV coinfection*: 0% (0/140)

TREATMENT AND MEDICINES

Is treatment provided for free in the public sector? No
Antileishmanial medicines included in the National Medicine List: Sodium stibogluconate (SSG), Amphotericin B, Paramomycin.

TREATMENT OUTCOME

Proportion of cases treated**(%, # treated cases/ total cases):
- VL: 100% (140/140)
- CL: N/A
Initial cure rate** (%, # cases initially cured /total cases):
- VL: 100% (140/140)
- CL: N/A
Failure rate** (%, # patients with treatment failure / total cases):
- VL: 0% (0/140)
- CL: N/A
Case fatality rate** (%, # patients who died/ total cases):
- VL: 0% (0/140)
- CL: N/A

VL = visceral leishmaniasis; CL = cutaneous leishmaniasis; PKDL = post-kala-azar dermal leishmaniasis; MCL = mucocutaneous leishmaniasis
* These indicators apply to primary and relapse cases; ** These indicators only apply to new cases

Data source: Ministry of Health, Uganda and Drugs for Neglected Diseases initiative (DNDi) © WHO, 2018. All rights reserved.