



THE REPUBLIC OF UGANDA

UGANDA MALARIA SURVEILLANCE PROJECT

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UMSP sentinel site malaria surveillance report July 2010

Introduction

Uganda Malaria Surveillance Project (UMSP) manages 6 out-patient sentinel sites located around the country with varying malaria transmission intensity. Based on historical entomological and epidemiological data these sites include two with relatively low transmission intensity (Kamwezi and Kihihi), two sites with medium transmission intensity (Walukuba and Kasambya) and two sites with high transmission intensity (Nagongera and Aduku).

The sentinel sites collect high quality malaria data, which is analyzed to produce monthly reports. Data is presented for both out-patient and in-patient sentinel sites. These monthly reports aim to give an overview of the malaria situation in the different parts of the country where the sentinel sites are located. UMSP also maintains a website umsp.muucsf.org that can be accessed for more information.

Data summary

District	Site	Total number of patients seen		Malaria suspected (number and proportion) ¹		Patients sent to the laboratory(number and proportion) ²		Laboratory confirmed malaria (number and proportion) ³	
		Total	< 5 years	Total	< 5 years	Total	< 5 years	Total	< 5 years
Kabale	Kamwezi	3927	674	2,899	570	2,765	525	1,398	326
			17%	74%	85%	95%	92%	51%	62%
Kanungu	Kihihi	2588	700	1,996	625	1,947	609	680	291
			27%	77%	89%	98%	97%	38%	50%
Jinja	Walukuba	3458	590	1,943	468	1,919	464	889	231
			17%	56%	79%	99%	99%	46%	50%
Mubende	Kasambya	1087	301	909	274	886	268	284	126
			28%	84%	91%	97%	98%	32%	47%
Tororo	Nagongera	2057	654	1,487	598	1,450	577	594	337
			32%	72%	91%	98%	96%	41%	59%
Aduku	Aduku	1957	557	1,217	489	1,206	485	639	343
			28%	62%	88%	99%	99%	53%	71%

¹ Denominator used to calculate proportion is total number of patients seen

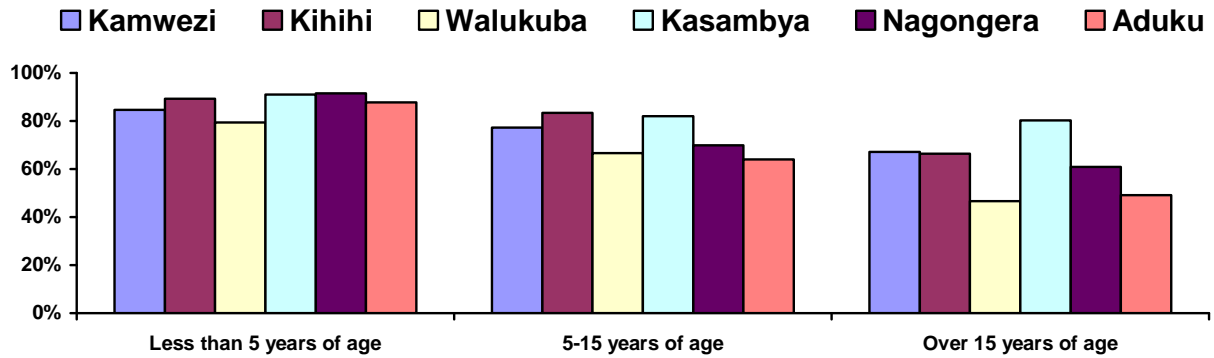
² Denominator used to calculate proportion is the number with malaria suspected

³ Denominator used to calculate proportion is the number of patients with laboratory test done

Total OPD attendance ranged from 1087 (Kasambya) to 3927 (Kamwezi). There was an over 10% decrease in the OPD attendance at Kamwezi (14%), Nagongera (11%) and Kasambya (13%) and a 17% increase at Kihihi. The attendance at other sites this month was comparable to the previous month. The age distribution of clinic attendees did not differ from the previous month.

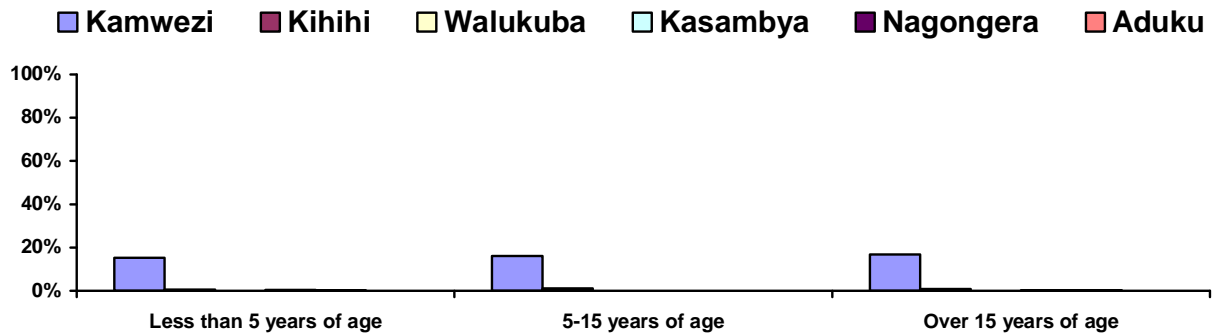
Compared to the previous month, there was no significant change in the proportion of patients suspected of malaria at all sites. Referral of suspected malaria cases for laboratory testing has increased at Kamwezi from 75% (Jun 10) to 95% (Jul 10). The OPD attendance and the absolute number of patients with suspected malaria decreased at this site this month and likely contributed to the increased referral. Further, we provided extra laboratory support to the site following the sub-optimal referral in June. The overall slide positivity rate remained relatively stable among all patients referred to a laboratory test and among under-fives at all sites and ranged from 32% (Kasambya) to 53% (Aduku).

Proportion of total patients seen suspected of having malaria stratified by age group



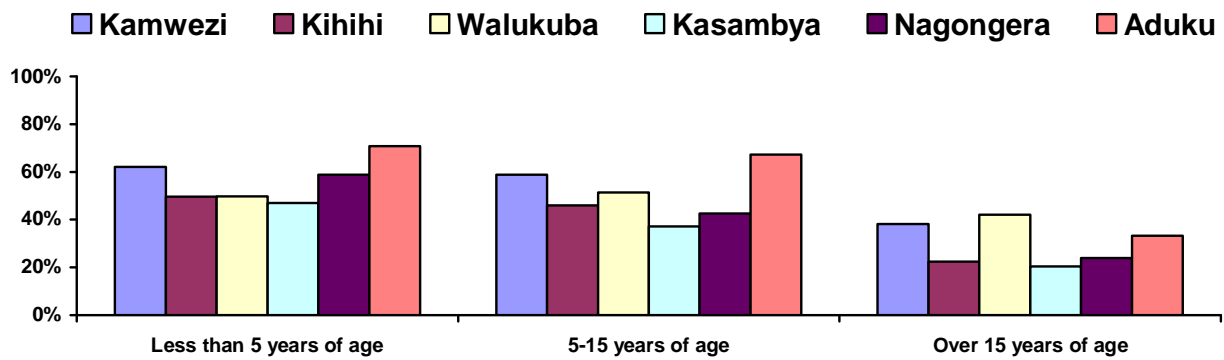
Suspected malaria cases are defined as all patients referred for a malaria laboratory test plus all patients not referred for a malaria laboratory test but given a clinical diagnosis of malaria. The proportion of children under 5 years suspected of malaria ranged from 79% (Walukuba) to 91% (Nagongera), while it ranged from 50% (Aduku) to 80% (Kasambya) among adults 15 years and above.

Proportion of laboratory tests done that were RDTs



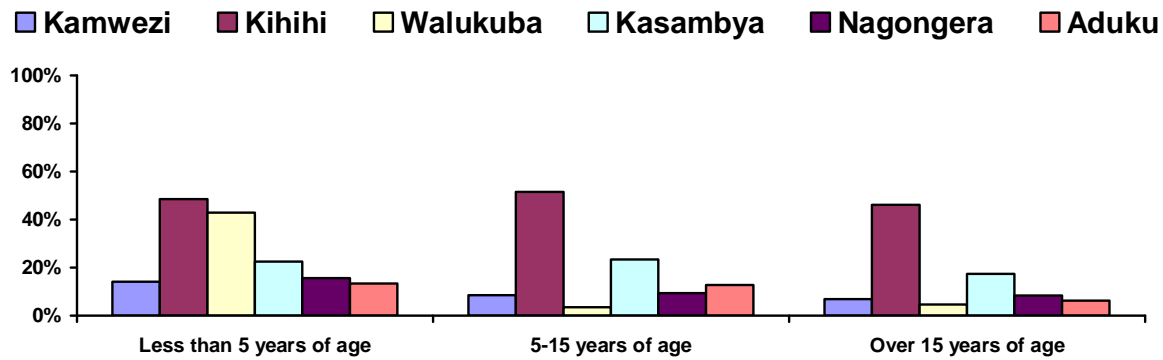
This month we provided RDTs to Kamwezi to enable them cope with the increasing numbers of patients who required a malaria test to be performed. As a result RDTs were used for 16% of those who had a lab test done at this site.

Proportion of laboratory tests done that were positive



Among children under 5, SPR was highest at Aduku (70%), then Kamwezi (62%), Nagongera (59%), Walukuba (50%), Kihiki (50%) and lowest at Kasambya (47%). The same pattern is observed for SPR among 5 – 15 year olds. Among the 15 years and older patients, the SPR ranged from 20% (Kasambya) to 42% (Walukuba).

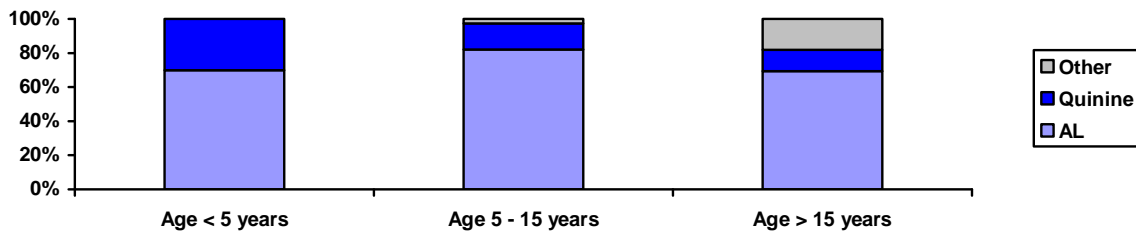
Proportion of patients with negative lab test result who were prescribed antimalarials



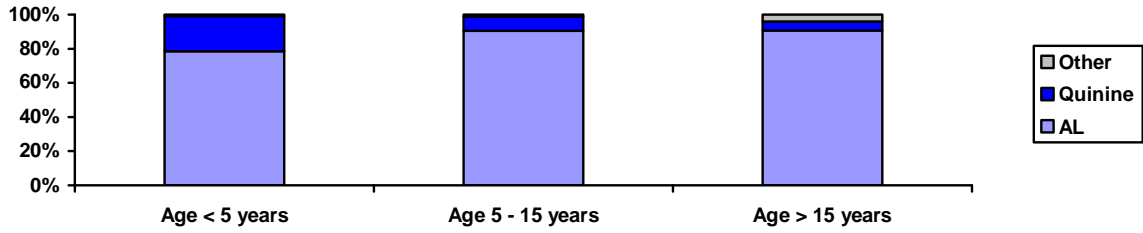
The practice of treating patients with a confirmed negative malaria test was least common at Kamwezi (4% lab-confirmed negative cases treated with an antimalarial) and most common at Kihiki (48% lab-confirmed negative cases treated).

Antimalarial drug treatment practices among those prescribed antimalarials

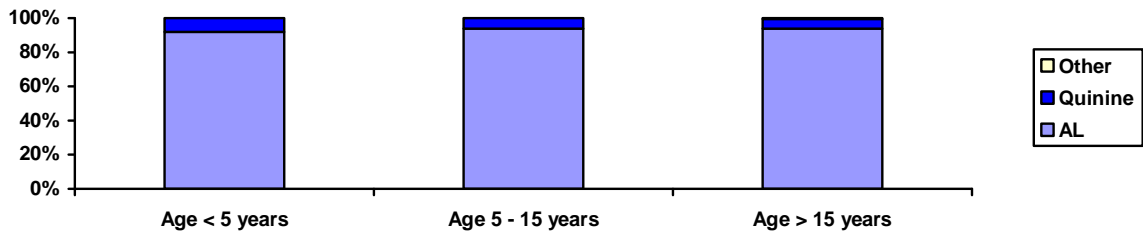
Kamwezi



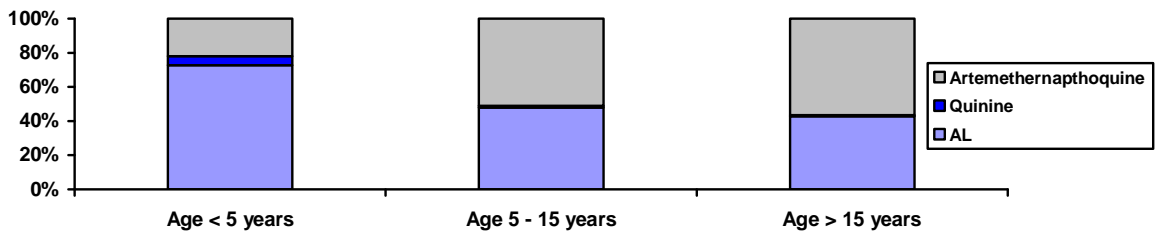
Kihihi



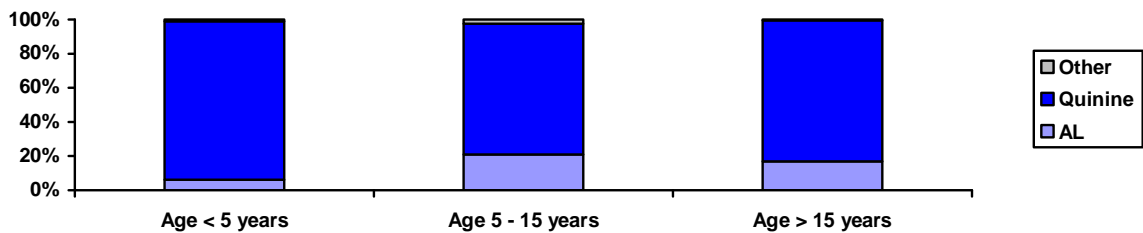
Walukuba



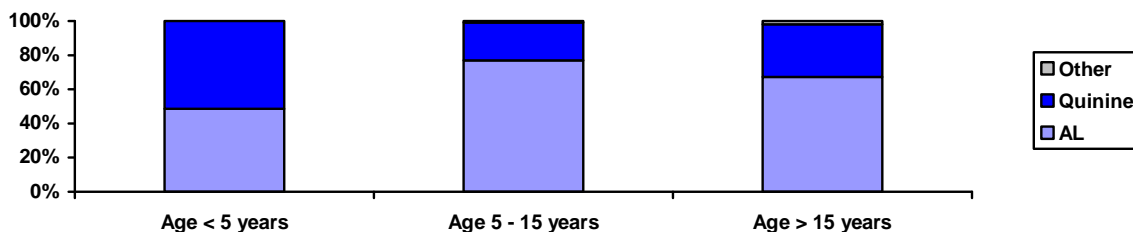
Kasambya



Nagongera

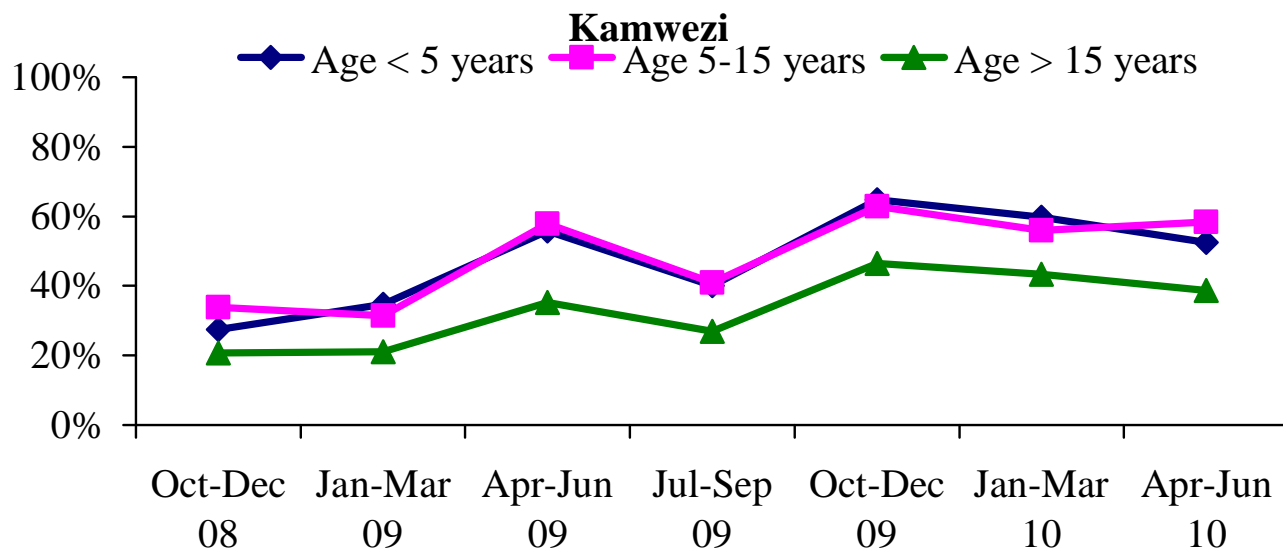


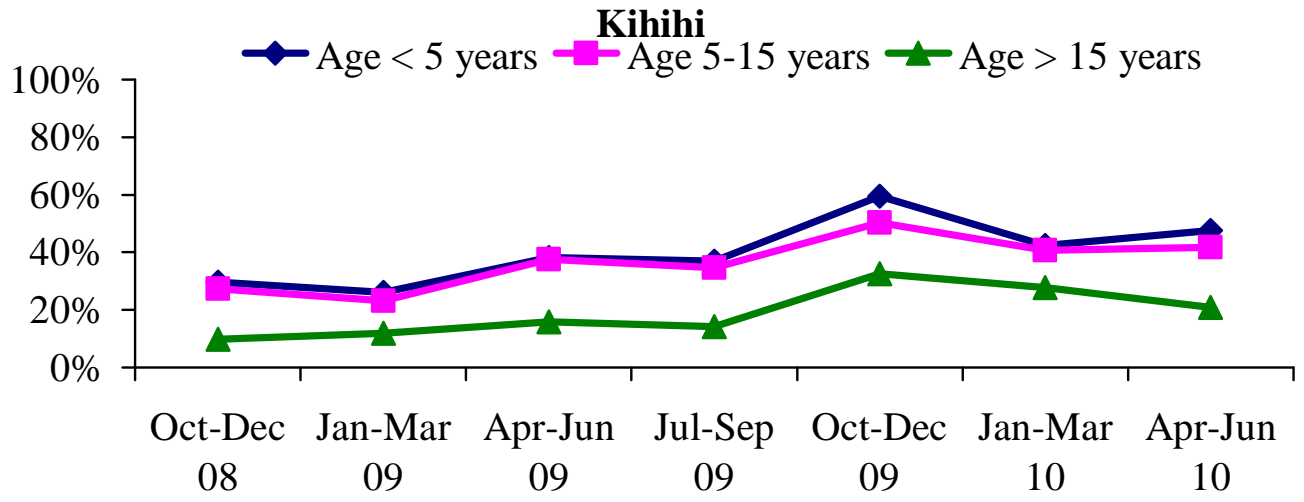
Aduku

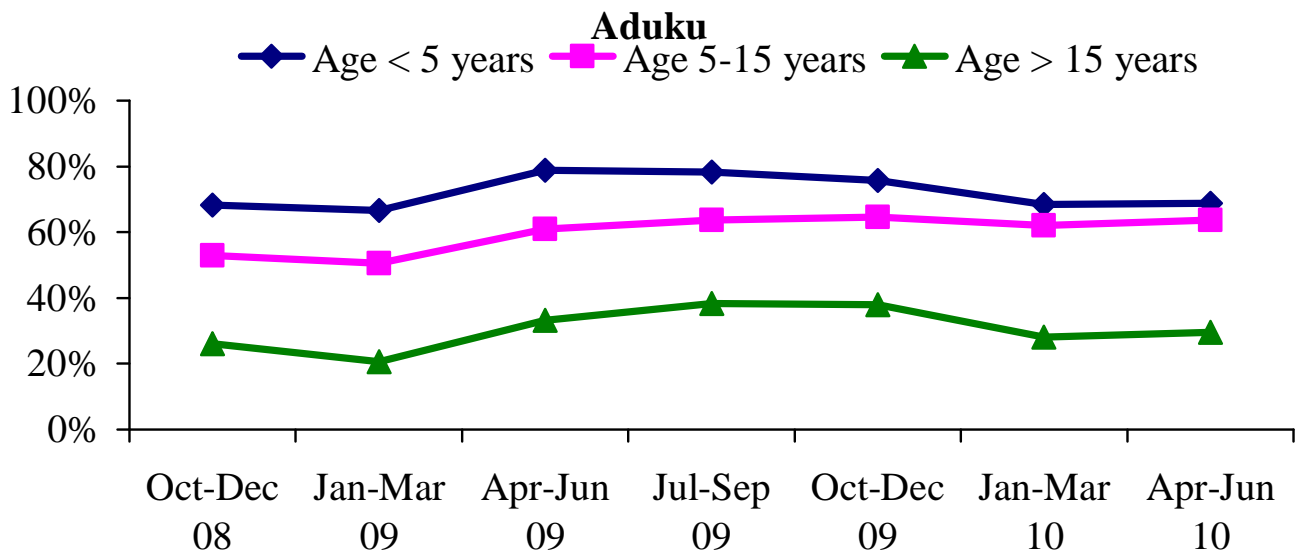
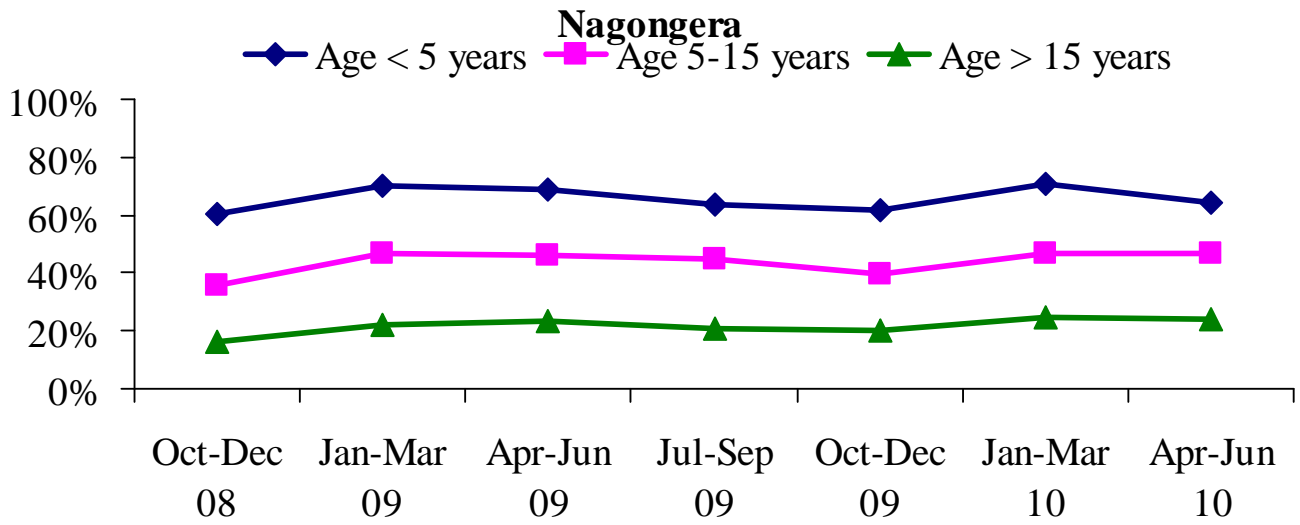
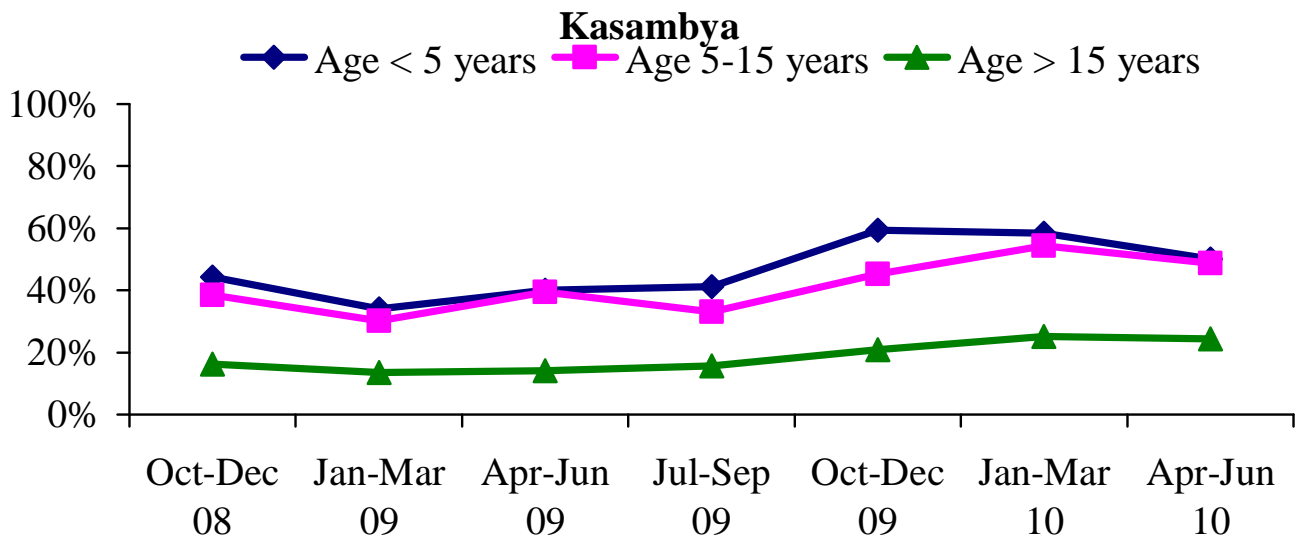


AL was predominantly prescribed at Kamwezi, Kihiki and Walukuba in all age groups, while it was predominantly prescribed among less than 5 years at Kasambya and among greater than 5s at Aduku. Kasambya predominantly prescribed Artemethernapthoquine in the over 5 years age groups. Quinine was predominantly prescribed in Nagongera among all age groups and in Aduku among less than 5s. All sites except Kihiki experienced some level of AL stock out this month and Aduku and Nagongera had no AL (all packs) throughout the entire month.

Temporal trends in the proportion of patients with a laboratory test for which the test is positive







Age-standardized Slide Positivity Rates

