



Tuberculosis declared a public Health Emergency in Uganda, Nov 2019

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Following the high numbers of people contracting tuberculosis (TB), high case fatality rates, and low levels of completion of TB treatment, the Ministry of Health in November 2019, declared TB a national public health emergency. This was aimed at mounting a national emergency response towards this disease.

It is estimated that a third of Ugandans are infected with the TB germ and everyday 235 people develop TB disease, out of which up to 30 die. Tuberculosis can affect anyone, anywhere in the country. However, some sub-populations and areas are more affected than others for example.

urban areas, institutionalized populations (boarding schools, prisons, university hostels, etc.), nomadic and other mobile populations, health workers, individuals who live in inadequately ventilated conditions, people living with HIV, diabetics the undernourished, those who excessively use alcohol, and tobacco users.

The national TB incidence is 200/100,000 population with a notification rate of 156/100,000 population. The distribution of TB in the country is not uniform with the targeted districts notifying up to 600/100,000 population., e.g. in Karamoja Region, notification rate ranges from 200-800/100,000, Acholi 100-500/100,000, Lango 130-360/100,000. In 2019 the TB rates in Karamoja were up to 10 times the national estimated burden, however only half of the estimated TB patients were registered in treatment and only 50% of the TB patients who were on treatment in the same year finished their full course of treatment (treated successfully). Four in 10 of the people with tuberculosis either do not start treatment or have their treatment interrupted for 2 consecutive months or more (lost to follow up, LTFU) in this region.





The Uganda Prison services (UPS) has notified the Ministry of Health of high rates of Tuberculosis in prisons, sometimes as high as 13 times the national average.

The Ministry of Health and partners have embarked on the response targeting areas of Lango, Acholi and Karamoja regions, and the Uganda Prisons Service. The National and District Task Force) has/have been activated for this national emergency. With support from the national incident management team and the Rapid Response Teams, the district teams will continue various activities including case management and containment, community engagement, contact tracing, psychosocial support, and community TB surveillance among others. Working with partners and the district teams, screening for TB at all service points at health facilities has been strengthened, contact tracing scaled up, surveillance for TB at household level, and treatment support for TB patients.

The Ministry of Health therefore calls upon the public to cooperate with the health workers to ensure effective screening for TB at the facility and in the community, support to people with TB to complete their treatment and to ensure daily observed therapy for TB medicine.