

THE UGANDA NATIONAL POPULATION BASED **TUBERCULOSIS PREVALENCE SURVEY 2014-2016**

Summary Findings and Recommendations

1. Background

The true burden of Tuberculosis (TB) in Uganda was not known until 2016. A national survey was conducted to provide a better estimate of the TB burden and assess the associated health seeking behavior among those reporting symptoms. These findings will inform country planning and policy formulations to end the TB epidemic in Uganda.

2. Methodology and Results

TB Symptom and Chest X-ray screening 41,156 individuals in 57 districts of Uganda were screened for TB using a combined TB symptoms and chest x-ray strategy.

had signs and symptoms 12.5% (5,144) screened positive either on symptoms and/ or chest x-ray. These were further tested to confirm their TB status using culture and Xpert MTB/RIF.

160 Cases

160 cases were found as bacteriologically confirmed survey cases.

TB BURDEN - KEY SURVEY FINDINGS

The burden of TB in Uganda is higher than previously thought.



100,000 people (previously 161 per 100,000)

vear

TB Screening: Symptom screening is nolonger adequate in identifying people with TB

Only 16 out of 160 (10%) confirmed TB cases had a positive symptom screen alone.

63 out of 160 (39.4%) confirmed TB cases had both a positive symptom screen and an abnormal chest Xray.

81 out of 160 (50.6%) confirmed TB cases had an 50.6% abnormal chest X-ray alone.

TB Diagnosis: GeneXpert is as good as culture in detecting TB

Smear microscopy detected only 41.3% (66 out of 160) of the TB cases.

GeneXpert detected 72 out of 73 (98.6%) culture positive TB cases

Health seeking behavior and the Health system



Only 61% (1655 out of 2714) of individuals with TB symptoms sought health care; 39% did nothing about their symptoms.

with TB symptom



62.7% (1038 out of 1655) of individuals with TB symptoms sought care from public health facilities while 37.3% sought care from private health facilities including pharmacies and drug shops.

private facilities



Only 170 out of 1565 (10.3%) individuals with TB symptoms were investigated by sputum and 100 (6%) by chest - X-ray when they sought care.

with TB symptoms

People most affected by TB

revalence of TB among men is 4 times higher than in women (734 per 100,000 versus 178 per 100,000)

The burden of TB is highest amongst people aged 35-44 where as the 15-24 age group has the highest missed

have a higher burden (504 per 100,000) than rural areas (370 per 100,000)

HIV prevalence among TB patients is still high at 27%



Recommendations

- 1. Incorporate and invest in X-ray as a screening tool for TB.
- 2. Deliberate shift from microscopy as the primary diagnostic tool to more innovative and superior diagnostic tools e.g. GeneXpert.
- 3. Strengthen the capacity of health workers to screen for TB.
- 4. Systematic screening for active TB disease in high risk populations (age, gender, geographical location, HIV status).
- 5. Engage the private sector to provide TB services (PPM).
- 6. Empower the community to demand and utilize TB services.
- 7. Develop and implement a TB implementation research agenda to operationalize some of the recommendations.
- 8. Mandatory TB case notification.

