Chinese Notifiable Infectious Diseases Surveillance Project

Kala azar

November 2023

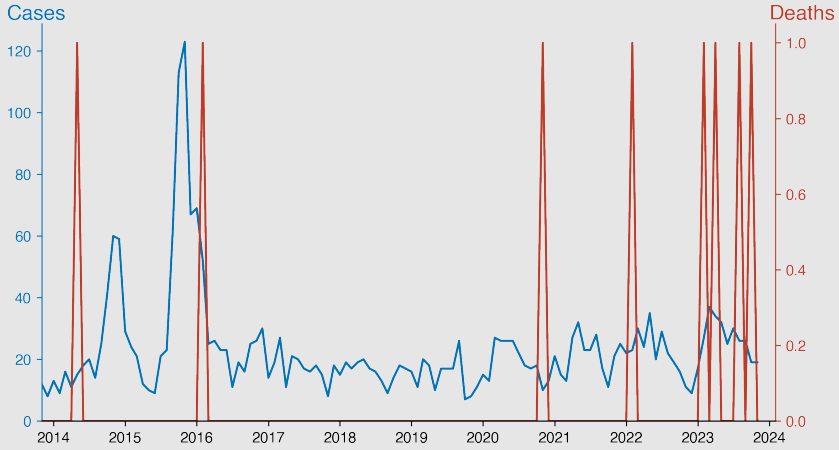
Introduction

Kala azar, also known as visceral leishmaniasis, is a systemic disease primarily affecting organs such as the liver, spleen, and bone marrow. It's caused by a parasitic protozoan of the Leishmania species, transmitted through the bite of infected female phlebotomine sandflies. Symptoms include irregular bouts of fever, weight loss, enlargement of the spleen and liver, and anemia. If left untreated, the fatality rate in developing countries can be as high as 100% within two years. It is prevalent in tropical and subtropical regions, particularly in India, Bangladesh, Nepal, Sudan, and Brazil.

Highlights

- Incidence of Kala azar in Chinese mainland has fluctuated, with a notable peak in 2015 (123 cases) followed by a decline to approximately 19 cases by November 2023.
- Mortality has been low, with infrequent deaths (1 per incident), suggesting effective case management and a low case-fatality rate.
- No distinct seasonal trend is evident, as months with higher case counts vary across years.
- Recent 2023 data indicates intermittent surges in cases, exemplified by 27 to 37 cases in early months, but with 19 cases in November, reflecting a controlled yet ongoing disease presence.

Temporal Trend



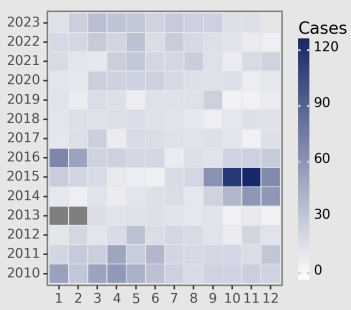
Cases Analysis

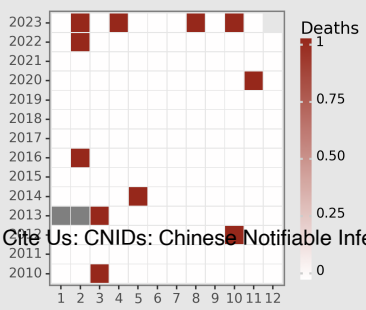
Kala azar cases in Chinese mainland from January 2010 to November 2023 demonstrate fluctuating patterns, with a notable spike observed during October and November 2015, reaching a peak of 123 cases. An overall declining trend is apparent post-2015 spike. The highest number of cases within the given time frame was in November 2015, while the data for January and February 2013 is missing. Yearly, cases tend to rise modestly during summer months, potentially reflecting seasonal vectors' activity patterns.

Deaths Analysis

Over the same period, the total reported deaths due to Kala azar were minimal, totalling 8. The deaths were sporadically distributed across the years with only one fatality occurring in particular months of 2010 (March), 2012 (October), 2013 (March), 2014 (May), 2016 (February), 2020 (November), 2022 (February), 2023 (April), and August and October of 2023. The fatality rate per reported cases remained very low, indicating either a high success rate in treatment or underreporting of fatal cases.

Distribution





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