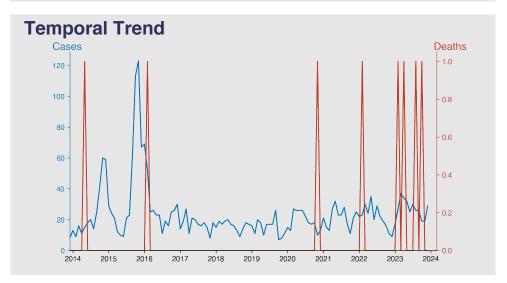
Chinese Notifiable Infectious Diseases Surveillance Report

Kala azar

December 2023

Introduction

Kala Azar, also known as Visceral Leishmaniasis, is a disease caused by the Leishmania parasite, transmitted through the bite of sandflies. This potentially fatal condition is endemic in over 70 countries, majorly affecting those in Asia, East Africa, and South America. Symptoms include fever, weight loss, swelling of the spleen and liver, and anemia. If untreated, it could lead to death. There are available treatments, but the lack of effective vaccines, coupled with social factors like poor sanitation and malnutrition, contributes to its prevalence.



Highlights

- Kala-azar cases on the Chinese mainland have shown sporadic fluctuations over the past decade, with a notable peak of 123 cases in November 2015.
- A general trend indicates relatively stable case numbers annually, oscillating between 9 and 37 cases per month since 2018, without major outbreaks.
- Mortality associated with Kala-azar has remained low, with occasional single death reports in 2014, 2016, 2020, 2022, and 2023 indicating potentially effective clinical management and control measures.
- As of December 2023, Kala-azar cases have maintained a steady presence, with 29 reported cases and no fatalities, highlighting ongoing transmission but controlled lethality of the disease.

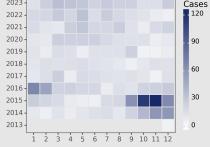
Cases Analysis

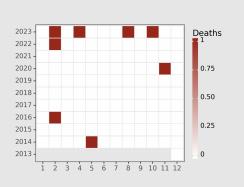
Over the decade from December 2013 to December 2023, Kala azar cases in Chinese mainland showed fluctuation but not a distinct long-term trend, with a peak of 123 cases in November 2015. Since then, cases have remained relatively stable. The data does not exhibit strong seasonal patterns, although a slight increase in cases is observed in mid-year and late fall to early winter, such as the small peak in October 2023. The persistence of cases throughout the period indicates continued endemic transmission of the disease without major outbreaks.

Deaths Analysis

The reported Kala azar mortality data from China mainland reflects low fatality, with deaths infrequent and sporadic over the 10-year observation. A total of only 5 deaths occurred, despite variations in monthly case reports. This suggests effective case management and treatment of Kala azar infections, contributing to favorable outcomes. The scattered nature of deaths, with no concurrent increase in case counts, implies that mortality is not tightly correlated with periods of higher transmission, indicating that factors other than disease prevalence may influence mortality risk.







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Version: 2024-01-16 (UTC+)

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