Epidemiology of tuberculosis in South Sudan

TB is a major problem of public health in South Sudan. According to the WHO estimates for the year 2014: i) the prevalence of TB was 319 cases per 100,000 population, ii) 17,000 people were newly affected with TB, indicating an incidence of 146 new TB cases per 100,000 population and iii) 3,400 persons died of TB which resulted in a mortality rate of 29 deaths from TB per 100,000 population. The information system of the National TB Programme (NTP) indicates that TB notification has increased from 2,955 cases in 2008 to 8,856 in 2014. The information system of NTP reported that among smear-positive pulmonary TB cases notified in 2014:

- 65% are males, which indicates a sex-ratio of 2 males for 1 female;
- One third of them belongs to the age group 25-34 years in both gender groups;
- 85% are aged less than 45 years in both gender groups.

Among the total number of smear-positive pulmonary TB patients notified, two thirds were identified in 4 of the 10 states, namely: Central Equator State (38%), Warrap State (12%), Northern Bahr El Ghazal State (11%) and Upper Nile State (5%). The incidence of notified smear-positive pulmonary TB cases was 37 per 100,000 population at national level in 2014. This notified incidence was significantly higher in males than in females in all the age groups except for those aged less than 15 years or more than 64 years (see graphs below). In the age group 25 to 44 years, males are approximately 2 times more likely to be notified for smear-positive pulmonary TB than females.

DOTS strategy was initiated at very low scale in 2002 with 12 health facilities which provided TB diagnosis and treatment services. The NTP adopted the WHO Stop TB Strategy in 2006 which focused on the extension of basic DOTS services and the implementation of TB/HIV collaborative activities. Until 2014, TB services have been implemented in 87 TB diagnosis and treatment centres; none of the 792 PHCU’s that are available across the country is ensuring any TB services. In early 2015, the NTP adopted the WHO End TB Strategy to achieve the objectives identified in the 2015-2019 NSP.

*This is an extract from the Guideline for Tuberculosis & TB/HIV Prevention, Care and Control in South Sudan, Third Edition, 2016 (Ministry of Health). The Diagnosis of tuberculosis flow chart is shown on the back cover (see page 27)*