

formerly under the official mailo land of the Namasole (Queen mother

of Buganda on the grounds that Mr Kibuule is holding, which

Bunyoro, West Nile top in cholera cases

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KAMPALA. A new report on Cholera epidemic indicates that a total of 11,110 people were affected by the disease in the top 16 worst affected districts in Uganda between 2011 and 2017.

At least 225 cases of deaths were reported during the same period. The report, however, did not give the statistics from the remaining districts that have had fewer cases reported.

The report titled: "Cholera situation in Uganda, including prevention strategy," was compiled by Dr Anne Nakinsige and Gerald Pande, both from the Ministry of Health. It was released yesterday during a three-day conference on cholera at Makerere University.

According to the report, the first cholera outbreak in Uganda occurred in 1971, when 757 cases were reported to World Health Organisation.

It says cholera was then

reported every two and four years up to 1993 and thereafter annually, with the biggest outbreak in 1998, following El Nino rainfalls.

Top four

Worst cases. The top four districts with the highest number of cases registered are Nebbi, with 2,348 cases and 49 deaths, Hoima (1,731 cases and 39 deaths), Buliisa (1,205 cases and 13 deaths) and Kasese (1,102 cases and 22 deaths).

The report notes that currently, cholera in Uganda appears to be largely endemic than epidemic, occurring more frequently in border districts and districts surrounding water bodies.

Some of the cholera hotspots were identified as Nebbi, Pakwach, Hoima, Buliisa and Kasese.

Other include fishing

communities, peri urban communities, border communities and inmates, among others.

Dr Henry Mwebesa, the director of health services, planning and development and the Ministry of Health, said many of the cases of cholera originated from across the border, especially from the western and northern Uganda.

He also said internally displaced people were prone to cholera attacks because of poor water sources and associated risks. He, however, said such cross-border outbreaks would easily be controlled if the host communities had better sanitation facilities.

Dr Jane Ruth Aceng, the minister of Health, acknowledged the problems and said efforts are being made to ensure that cholera is eliminated. He said the country has been grappling with cholera for more than fifty years, yet the disease is preventable.