

5th World Congress on

PUBLIC HEALTH, NUTRITION & EPIDEMIOLOGY

July 23-24, 2018 Melbourne, Australia

Distribution and patterns of common mental health disorders in Uganda, 2017**Alitubeera Phoebe Hilda¹, Daniel Kadobera¹, Benon Kwesiga¹, Alex Riolexus Ario¹, Hafsa Lukwata² and Ndyabangi Sheila²**¹Uganda Public Health Fellowship Program, Uganda²Ministry of Health, Uganda

Background & Aim: Mental, Neurological and Substance abuse (MNS) disorders affect 25% of the global population. In Sub-Saharan Africa MNS disorders account for 19% of years lived with disability. Empirical evidence shows MNS disorders disproportionately affect the poor and undermine efforts to achieve sustainable development goals. Surveillance of MNS disorders is invaluable for adequate and appropriate service delivery targeting persons with the disorder. We sought to determine trends and distribution of common mental, neurological and substance abuse disorders in Uganda using national health surveillance data.

Method: We conducted secondary data analysis on Common Mental and Neurological Disorders (CMNDs) from the Health Management Information System between 2012 and 2016. Disorders assessed included anxiety disorders, bipolar, childhood disorders, epilepsy, depression, schizophrenia, HIV psychosis, dementia and other mental disorders. Descriptive statistics are presented using proportions of CMNDs by sex, region, age and case type. Proportions of CMNDs were calculated by dividing the number of cases by the total population of the region. Population data was obtained from the 2014 census. We analyzed trends of CMNDs from 2012 to 2016.

Result: Prevalence of all CMNDs was similar between males (15/1000) and females (16/1000). Epilepsy was the commonest disorder (7.6/1000), followed by Bipolar affective disorder (2.4/1000). Northern Uganda accounted for the largest prevalence of epilepsy (10/1000) while central Uganda had the highest prevalence of bipolar affective disorder (6.2/1000), schizophrenia (2.6/1000), depression (1.8/1000) and HIV-related psychosis (1.1/1000). On average, CMNS increased 9% annually from 2012-2016.

Conclusion: CMNDs are highly prevalent. Epilepsy accounts for the largest burden with Northern Uganda being most affected region. CMNDs increased over the period evaluated. We recommend enhancement of mental health services based on this evidence.

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