Estimating the global burden of typhoid fever

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Overview

- Existing typhoid fever burden estimates
- Methodology for typhoid fever burden
 - Incidence
 - Mortality
 - New estimate
- Limitations
- Future directions



Estimates of global typhoid burden

- 1984
 - Dr Dhiman Barua, WHO
 - PAHO meeting
 - Reviews of Infectious Diseases, 1986
- 1986
 - United States Institute of Medicine
 - Committee on Issues and Priorities for New Vaccine Development
- 1996
 - World Health Report
 - 16 million illnesses
 - 600,000 deaths (3.8% mortality)



Limitations of existing estimate

- Methods not outlined in detail
- Limited source data
- Do not adjust for age distribution – Incidence
 - Mortality
- Exclude China



Changes since 1984

- Growth of global population
- Changes in sanitary conditions
- Improved surveillance
- Initiation of population-based typhoid incidence studies
- Publication vaccine studies from new regions
- Improved understanding of age distribution of typhoid fever
- Formalization of methods for assessment of disease burden



Incidence: sources

- Literature search (Medline)
- National typhoid surveillance data



Incidence: results

- Literature search
 - 859 articles
 - 250 articles selected
 - 22 reliable, population-based
- National surveillance data
 Developed countries



Incidence: data sources





Reliable national surveillance data Limited national surveillance data Incidence study



Incidence: global population

- United Nations Sex and Age of the World's Population
 - 2000 medium fertility variant estimate
- Standard age strata
- United Nations regions

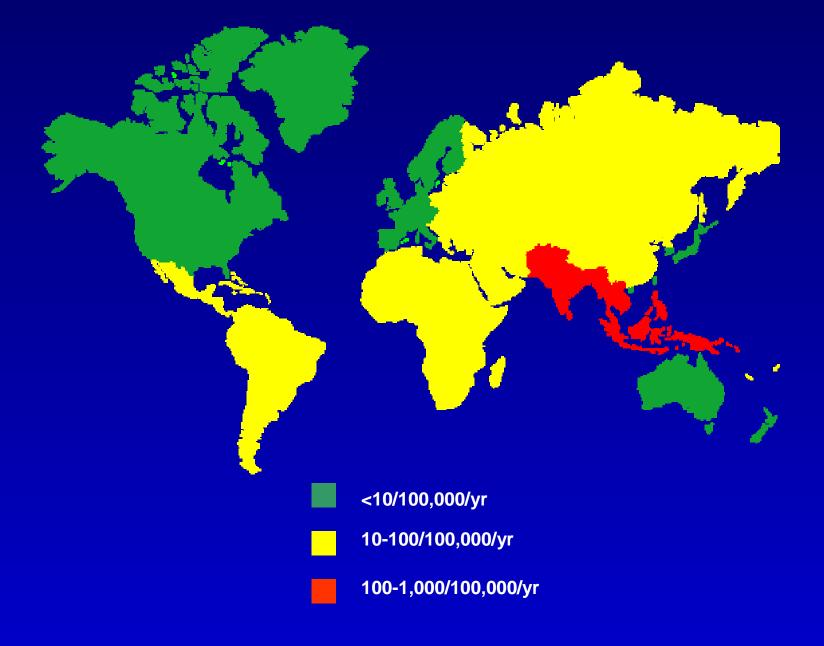


The United Nations classification of major areas and regions

Area	Region	
Africa	Eastern Africa	
	Middle Africa	
	Northern Africa	
	Southern Africa	
	Western Africa	
Asia	Eastern Asia	
	South-central Asia	
	South-eastern Asia	
	Western Asia	
Europe	Eastern Europe	
	Northern Europe	
	Southern Europe	
	Western Europe	
Latin	Caribbean	
America/Caribbean	Central America	
	South America	
Northern America	Northern America	
Oceania	Australia/New Zealand	
	Melanesia	
	Micronesia	
	Polynesia	



Typhoid fever incidence by region



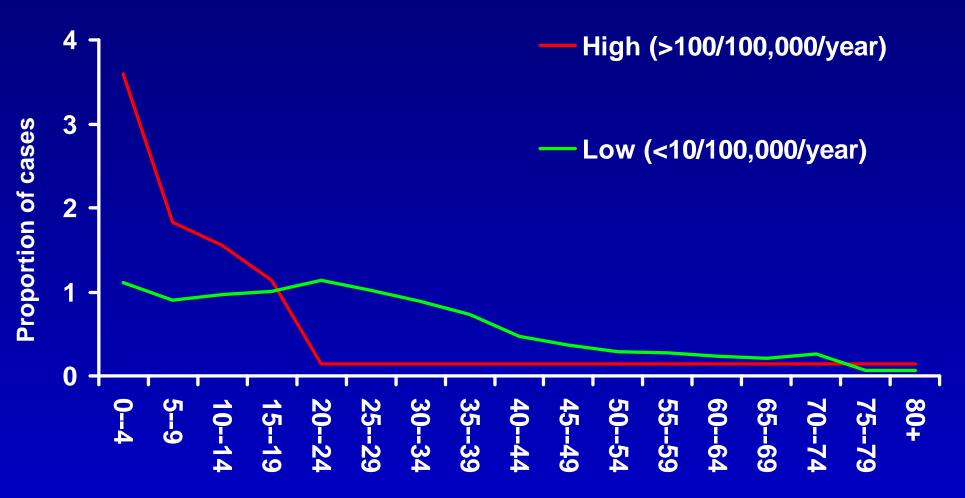


Incidence: extrapolating data

- Extrapolate
 - One age group to others
- Age distribution of typhoid fever
 - Three incidence levels
 - Limited range of population-based typhoid incidence studies with data by age group



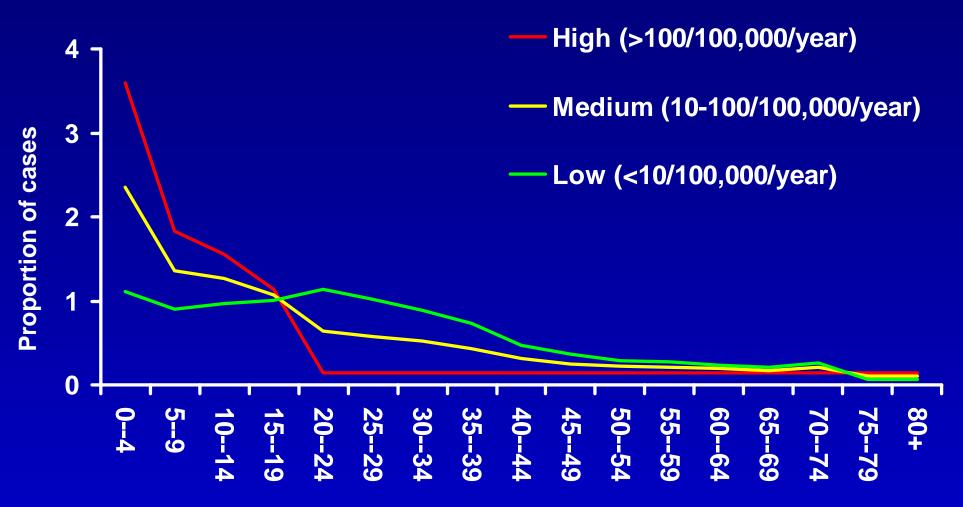
Age incidence profiles



Age group



Age incidence profiles



Age group



Incidence: calculation

- Global population divided into regions and age strata
- All data sources considered for each region
- Most conservative rates selected
- Incidence for each age stratum calculated from age distribution curves



Example	
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Northern Africa region

Age strata	Population	Source data incidence	Extrapolated incidence	Total cases by age stratum
0-4	21,995,000		83	18,255
5-9	20,613,000	48	48	9,894
10-14	20,258,000		44	8,914
15-19	19,285,000		38	7,328
20-24	16,926,000		23	3,893
25-29	14,236,000		20	2,847
30-34	12,562,000		18	2,261
35-39	10,892,000		15	1,634
40-44	9,490,000		11	1,044
45-49	7,823,000		9	704
50-54	5,807,000		8	465
55-59	4,255,000		7	298
60-64	3,746,000		7	262
65-69	2,990,000		6	179
70-74	2,160,000		7	151
75-79	1,211,000		4	48
+08	788,000		4	32
Total				58,210



Incidence: estimate

• 11 million (10,825,486) illnesses/year



Mortality

- Lack population-based data
- Published studies
 - Hospital-based
 - Overestimate
- Infants and children – Mild illness



Mortality

- Highest incidence
 - Children <5 years</p>
 - South-central and south-east Asia
- Conservative mortality 1%



Global typhoid burden

- 11 million (10,825,486) illnesses/year
- 110,000 (108,254) deaths/year
- South-central and south-eastern Asia



Limitations

- Few data points to extrapolate from
- Vaccine studies – High incidence areas
- Adjustments
 - Blood culture sensitivity
 - Antibiotic therapy
 - Mild illness



Future directions

- Standard method
- Sentinel surveillance tool
 - Incidence
 - Mortality
- Widely applied
- Integrated with disease burden estimates for other febrile illnesses



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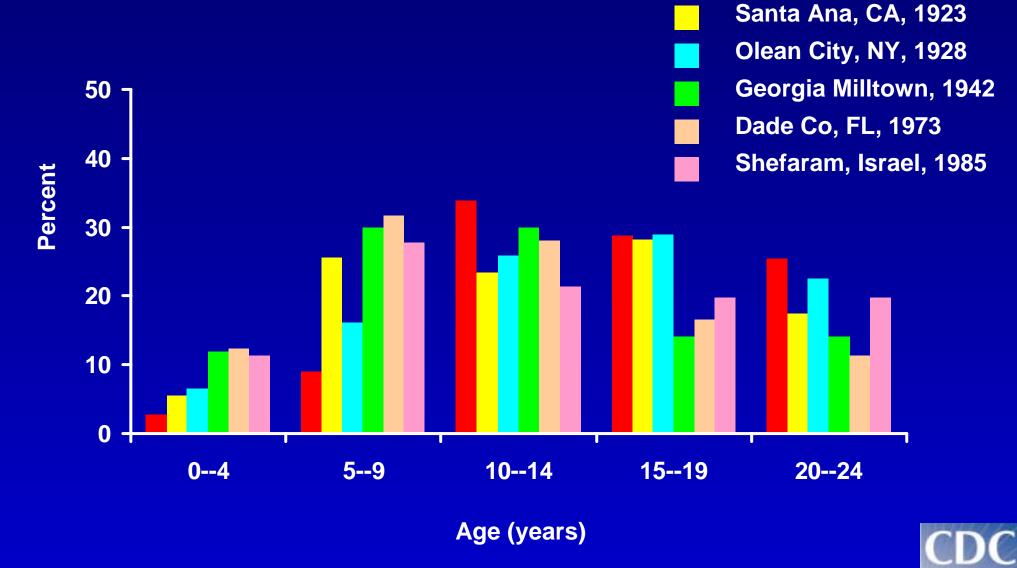
Claire-Lise Chaignat, MD



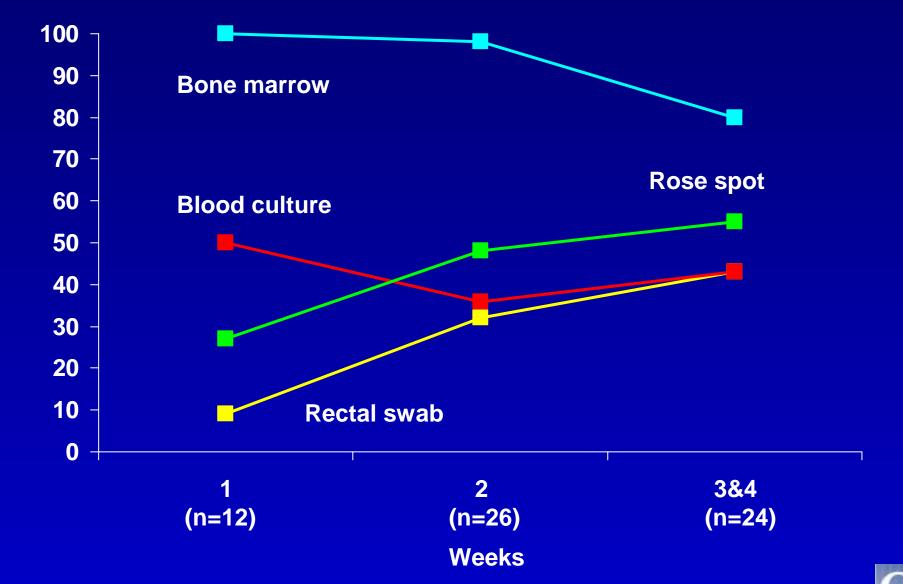
Age incidence of waterborne typhoid outbreaks

Cork, Ireland, 1920

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Culture methods for typhoid fever



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From: Gilman RH et al. Lancet 1975; 1: 1211-3

Serologic tests for typhoid fever

Widal test

- O and H antigens
- Limited use even when paired sera collected
- Better rapid diagnostic tests
 - Antibody and antigen detection
 - Need to be inexpensive, practical, sensitive, specific
 - Countries with endemic typhoid fever



Global burden of Shigella

- CDC and WHO
- Kotloff KL et al. Bull WHO 1999;77:651-666
- Global population stratified
 - Age
 - Developed and industrialized
- Published studies of diarrhea incidence for each stratum
- Published studies of etiology of diarrhea for each stratum
- Calculated global burden

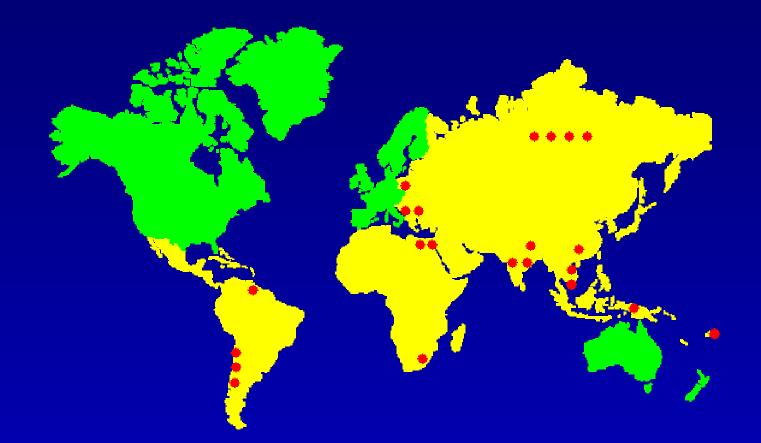


Shigella method is not appropriate for typhoid

- Syndrome of undifferentiated fever, not diarrhea
- Little data exist on fever incidence
- Even fewer data on the etiology of fever in developing countries
- Another approach is needed



Incidence: data sources

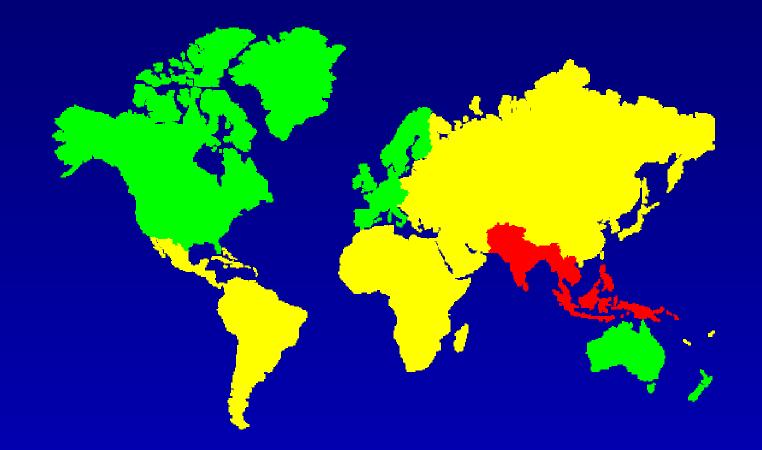




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Typhoid fever incidence by region









<10/100,000/yr

Rationale for estimating global burden

Evaluation of policies for health improvement requires detailed, reliable assessment of the epidemiologic conditions and the burden of disease

Murray CJL, Lopez AD. Global burden of disease



Incidence: extrapolating data

• Extrapolate

- One country in a region to others

