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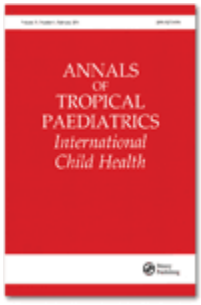
Home and community management of acute respiratory infections in children in eight Ugandan districts



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Abstract:

Background: Acute respiratory infections (ARI), especially pneumonia, are the second largest child killer in sub-Saharan Africa. Symptoms, including cough and difficult/rapid breathing, frequently overlap those of malaria. In Uganda, the Home-Based Management (HBM) strategy treats all childhood fevers as malaria in the community, ignoring the pneumonia symptom overlap.

Aim: To determine the extent of overlap of fever and ARI symptoms at community level, the timeliness of care-seeking and the treatments sought for ARI with or without fever.

Methods: From eight districts, 3223 households with 3249 children aged <2 years were randomly selected through two-stage cluster sampling and their primary caretakers were interviewed regarding the child's most recent illness episode using 2-week recall.

Results: Of the 1682 children <2 years who had been sick, 19% reported overlapping symptoms of fever, cough and "difficult/rapid breathing". Of these, 45% were given antimalarials alone. Use of health facilities was low and 42% of antibiotics used were obtained from drug shops or home-stocks.

Conclusions: Given the large overlap of fever and ARI symptoms and the reported practice of using primarily antimalarials, the implications of HBM might be the continued or increased mismanagement of pneumonia. Community drug distributors' ability to identify rapid breathing and make a presumptive diagnosis of pneumonia based on respiratory rate should be tested.

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