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Anthrax outbreak associated with handling animals that died suddenly in Kazo District, Uganda, December 2025–March 2026

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Anthrax is endemic in Uganda. On January 22 2026, Ministry of Health was notified of confirmed human cases after sudden livestock deaths in Kazo District. We investigated exposures and response timeliness. We defined suspected cutaneous anthrax as acute-onset skin lesions with ≥2 of: itching, reddening, swelling, fever or malaise, in Kazo District residents from Dec 1, 2025 to Mar 31, 2026; suspected gastrointestinal anthrax as acute-onset abdominal pain with ≥2 of: vomiting, diarrhea, fever, or loss of appetite; and confirmed cases were PCR-positive for Bacillus anthracis. We conducted active case finding, calculated attack rates (ARs), an unmatched case-control study (1:4) and assessed timeliness using 7-1-7 framework. We identified 135 cases (14 confirmed); overall AR was 65/100,000 with two (1.5%) deaths. 113 (84%) were cutaneous. Six (60%) of 10 animal samples tested PCR-positive. Environmental assessment found improper carcass disposal. Among 45 cases and 184 controls, risk factors (ref: no exposure) included butchering (aOR=11,95%CI=4.7–24), handling without (aOR=65,95%CI=20–213), or with consumption of meat from sick animals (aOR=72,95%CI=10–98). Detection took 35 days, notification <1 day, response completion 10 days, delayed by weak surveillance and low suspicion index. This outbreak was driven by contact with and consumption of meat from animals that died suddenly. Strengthening animal disease surveillance and enforcing safe carcass disposal could reduce spillover.

Keywords

Anthrax, 7-1-7 framework, Kazo District, Uganda

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