EPIDEMIOLOGICAL ASPECTS OF HOSPITALIZED PATIENTS DUE TO VISCERAL LEISHMANIASIS IN SOBRAL, CEARÁ, BRAZIL

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The SUS Hospital Information System (SIH/SUS) is essential to the epidemiologic surveillance of visceral leishmaniasis, as it provides refined data regarding aspects such as hospitalization, hospitalization costs, mortality rates, and spatial distribution of a certain disease. We aimed to evaluate the epidemiological profile of patients hospitalized due to visceral leishmaniasis, from 2014 to 2023, in Sobral/Ceará. This study is a cross-sectional, retrospective, and descriptive analysis of secondary data from the Department of Information Technology of Unified Health System (DATASUS), specifically in the SIH/SUS. We selected the section "Epidemiology and Morbidity", and the sub-section "Hospital Morbidity" and applied the filter "General, by the city of hospitalization from 2008". All data was restricted to the municipality of Sobral in the TabNet tool. We evaluated sex, age, race, hospital admissions per year, and mortality rate. Sobral registered 515 cases of human visceral leishmaniasis, 265 hospital admissions, and 15 deaths as an outcome of the disease. Among the hospitalized patients, 60% were male and 34,3% were between 1 and 4 years old. The hospitalization rate was 130,52/100000 inhabitants, and the average time patients stayed at the hospital was 18,7 days; the average cost per patient hospitalized was 904,79 reais. Visceral leishmaniasis is an endemic disease in Sobral, and we observed an upward trend in the number of confirmed cases, especially from 2020 to 2023. Considering the data retrieved from SIH/SUS, health authorities can decide the better use of financial resources, especially for drug supply and patient management at public health facilities. Therefore, an efficient surveillance system is essential for the early detection of visceral leishmaniasis cases, allowing a fast response and contributing to reducing hospitalizations and mortality rates by visceral leishmaniasis.

Keywords: Visceral leishmaniasis; epidemiological aspects; prevention.