Most typhoid cases in Rwanda occur in children younger than 15 years old.

Drug-resistant typhoid strains are a growing problem in Rwanda, regionally, and across the globe.

Typhoid intestinal perforations are a severe and life threatening complication of the disease. A study found that typhoid intestinal perforation was the third most common reason for peritonitis surgery in children at the University Teaching Hospital in Kigali. These cases have a more complicated recovery, are more expensive to treat, and have a higher mortality rate.

Global data show that multidrug-resistant (MDR) typhoid prevalence has increased dramatically since 1992. A study from Kigali found a significant increase of MDR typhoid, from 9.1% to 25% between 2007 and 2008.

As drug-resistant typhoid becomes more common, it will become more difficult to treat and force the use of more expensive and less readily-available treatment options.

Rwanda is a typhoid-endemic country. The Global Burden of Disease study estimated that, in 2019, there were at least:

- 12,115 typhoid cases (96 cases per 100,000)
- 201 typhoid deaths
- 15,086 disability-adjusted life-years lost to typhoid

While typhoid is rarely fatal, the recovery is long and difficult. The disease takes time, money, and productivity from those infected and their families and is associated with numerous long-term complications.
Typhoid conjugate vaccines (TCVs) in Rwanda

The World Health Organization (WHO) recommends the introduction of prequalified TCVs be prioritized in countries with a high burden of typhoid disease or a high burden of drug-resistant typhoid. Gavi, the Vaccine Alliance support for introduction is available now. TCVs:

- Are highly effective and safe for children as young as 6 months of age;
- Require a single dose to prevent 79-85% of typhoid cases in children;\(^5\)
- Offer strong protection for at least 4 years; and
- Can be co-administered with measles-rubella vaccine.\(^6\)

Findings from an economic analysis predict that, even in the absence of a Gavi subsidy, a catch-up campaign with TCV could be cost-effective in Rwanda.

- Typhoid is endemic in Rwanda, with more than 12,000 cases per year.
- Rwanda’s burden of typhoid is most heavily borne by children younger than 15 years of age.
- Data show an increase in drug-resistant typhoid in Rwanda, regionally, and globally.
- TCVs are safe, effective, and WHO-recommended for routine immunization as part of a cost-effective, integrated approach to typhoid prevention and control alongside safe water, sanitation, and hygiene interventions.
- Gavi support for TCV introduction is available now.