

SDG Goal 3	Good health and well-being
SDG Target 3.3	By 2030, end the epidemics of AIDS, tuberculosis, malaria and neglected tropical diseases and combat hepatitis, water-borne diseases and other communicable diseases
SDG Indicator 3.3.5	Number of people requiring interventions against neglected tropical diseases
Time series	People requiring interventions against neglected tropical diseases

1. General information on the time series

- Date of national metadata: 23 May 2023
- National data: <http://sdg-indicators.de/3-3-5/>
- Definition: The time series measures the reported number of neglected tropical diseases cases arising in a given year.
- Disaggregation: disease

2. Comparability with the UN metadata

- Date of UN metadata: March 2024
- UN metadata: <https://unstats.un.org/sdgs/metadata/files/Metadata-03-03-05.pdf>
- The time series is partly compliant with the UN metadata. It only covers the neglected tropical diseases: dengue, echinococcosis, leprosy and rabies.

3. Data description

- The number of neglected tropical diseases from the Robert Koch Institute (RKI) is based on the reports of laboratory confirmed cases of dengue, echinococcosis, leprosy according to § 7 (3) of the German Protection against Infection Act (IfSG). The German Protection against Infection Act (IfSG), which came into force on January 2001, regulates which diseases have to be reported in case of suspicion, illness or death. The reporting, usually by doctors and laboratories, is mandatory. However, this reporting requirement is not always followed, so that part of the diagnosed notifiable diseases is not included in the reporting system.

4. Access to data source

- Online database SurvStat@RKI 2.0:
<https://survstat.rki.de/default.aspx>
- Infectious Disease Epidemiology – Annual Report:
https://www.rki.de/EN/Content/infections/epidemiology/inf_dis_Germany/yearbook/Yearbook_inhalt.html

5. Metadata on source data

- Quality Report – Diagnoses of hospital patients (only available in German):
<https://www.destatis.de/DE/Methoden/Qualitaet/Qualitaetsberichte/Gesundheit/diagnose-krankenhauspatienten.pdf>

6. Timeliness and frequency

- Timeliness: t + 3 weeks after data received
- Frequency: Annual

7. Calculation method

- Unit of measurement: Number
- Calculation:

Not applicable.

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SDG Indicator 3.3.5	Number of people requiring interventions against neglected tropical diseases
Time series	Inpatient treatment of neglected tropical diseases

1. General information on the time series

- Date of national metadata: 20 May 2022
- National data: <http://sdg-indicators.de/3-3-5/>
- Definition: The time series measures the number of patients treated in hospitals with diagnosis neglected tropical diseases classified with the following ICD-10-diagnosis codes:
 - A30: Leprosy
 - A31.1: Buruli ulcer
 - A66: Yaws
 - A82: Rabies
 - A97: Dengue
 - B55: Leishmaniases
 - B56: African trypanosomiasis
 - B67: Echinococcosis
 - B72: Dracunculiasis

ICD-10 is the International Statistical Classification of Diseases and Related Health Problems 10th Revision (German Modification).

- Disaggregation: disease

2. Comparability with the UN metadata

- Date of UN metadata: March 2024
- UN metadata: <https://unstats.un.org/sdgs/metadata/files/Metadata-03-03-05.pdf>
- The time series is partly compliant with the UN metadata. It only covers inpatient treatment.

3. Data description

- The data is derived from the hospital statistics conducted by the Federal Statistical Office.
 - African trypanosomiasis: Parasitic disease caused by *Trypanosoma brucei* in Africa, which leads to a fatal encephalopathy. It is transmitted by tsetse flies. African trypanosomiasis is preferably treated as an inpatient in a tropical medical centre
 - Buruli ulcer: Chronic skin ulcer, usually in children, caused by *Mycobacterium ulcerans*. Buruli ulcer occurs in West and Central Africa, less frequently in Latin America, Papua New Guinea and northern Australia. The pathogen is probably transmitted through minor skin injuries or insect bites. Treatment is surgical, antibiotic and physiotherapeutic (avoidance of scar contractures).
 - Dengue: Severe, acute febrile infection caused by the dengue virus in tropical and subtropical areas. Transmitted by the yellow fever mosquito (*Aedes aegypti*, synonym *Stegomyia aegypti*) or Asian tiger mosquito (*Aedes albopictus* or *Stegomyia albopicta*), the infection has been spreading in recent

decades. With timely treatment, the mortality rate is less than 1 %.

- **Dracunculiasis:** Nearly eradicated tropical worm disease caused by *Dracunculus medinensis*. The adult worm lives in the subcutaneous tissue. The larvae enter the water through an ulcer, where they infest water fleas (hoppers). When these intermediate hosts are ingested through the drinking water, the larvae migrate into the tissue. Treatment involves extracting the worm.

- **Echinococcosis:** Infectious disease caused by fins of the dog tapeworm or fox tapeworm. The liver is usually affected. A distinction is made between cystic echinococcosis with encapsulated hydatid cysts caused by fins of the dog tapeworm (*Echinococcus granulosus*) and alveolar echinococcosis with invasively growing hydatid cysts caused by larvae of the fox tapeworm (*Echinococcus multilocularis*).

- **Leishmaniases:** Infectious disease caused by *Leishmania* (intracellular protozoa). The classification of the pathogens into numerous species is in flux. Sand flies (*Phlebotominae*) transmit the parasite from various mammals to humans. Symptoms and prognosis depend on the pathogen and the form of the disease. Amphotericin B and antimony preparations are mainly used therapeutically.

- **Leprosy:** Infectious disease of the skin, mucous membranes and peripheral nerves caused by *Mycobacterium leprae* with trophic and sensory disturbances, paralysis and ultimately deformity.

- **Rabies:** A very rare infectious disease in Germany caused by the rabies virus with an unfavourable prognosis. Rabies is mainly transmitted through the bite of infected animals. Prophylactic and post-exposure prophylactic vaccinations are available, but there is currently no specific therapy. There is an obligation to report according to § 6 and 7 of the Infection Protection Act.

- **Yaws:** Chronic infectious disease caused by contact infection with *Treponema pertenu* (tropical treponematosi). Initially, skin lesions appear; in the late stages, the skin of the groin thickens and bones become deformed. *Frambösia* usually occurs in children in the hot and humid regions of Africa, Latin America and Asia. Single doses of antibiotics are effective.

4. Access to data source

- Diagnostic data of the hospitals – GBE:
https://www.gbe-bund.de/gbe/pkg_olap_tables.prc_reset_ind?p_uid=gast&p_aid=75096930&p_indnr=702&p_sprache=E

5. Metadata on source data

- Quality Report – Diagnoses of hospital patients (only available in German):
<https://www.destatis.de/DE/Methoden/Qualitaet/Qualitaetsberichte/Gesundheit/diagnose-krankenhauspatienten.pdf>

6. Timeliness and frequency

- Timeliness: t + 12 months
- Frequency: Annual

7. Calculation method

- Unit of measurement: Number
- Calculation:

Inpatient treatment of neglected tropical diseases = \sum_i Patients treated in hospitals with assigned ICD k_i [number]

$i \in \{\text{Leprosy; Buruli ulcer Yaws; Rabies; Dengue; Leishmaniasis; Human African trypanosomiasis; Echinococcosis; Dracunculiasis}\}$

$k_{\text{Leprosy}} = A30$

$k_{\text{Buruli ulcer}} = A31.1$

$k_{\text{Yaws}} = A66$

$k_{\text{Rabies}} = A82$

$k_{\text{Dengue}} = A97$

$k_{\text{Leishmaniasis}} = B55$

$k_{\text{Human African trypanosomiasis}} = B56$

$k_{\text{Echinococcosis}} = B67$

$k_{\text{Dracunculiasis}} = B72$