Abstracts

Community 2.61 ( $95 \%$ CI: 2.22-3.01) and CHW, 0.98 (95\% CI: 0.74-1.21).

Conclusion The stigma averages perceived in the territory, by all study populations, reinforce the challenges for leprosy control in these areas. However, the SD of those affected by the disease was considered low, particularly among CHW. Evaluating different perspectives helps understanding stigma, helping in the integrated composition strategies to face its repercussions.

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Modelling of Buruli ulcer to guide efforts towards 2021-2030 Neglected Tropical Diseases Roadmap Goals
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Biography Clinical Scientist at SpotLab S.L. and researcher at the National School of Public Health. She holds a phD in Microbiology and Parasitology, a master in Tropical Medicine and International Health, master in Biostatistics and a bachelor degree in Biology. She has experience on the development and implementation of new molecular and serological diagnostic methods, as well as background in modelling studies and she carried out field work in Ethiopia, Angola and Mozambique through collaborative projects with different institutions of the National Health System.

Objective Buruli ulcer is caused by Mycobacterium ulcerans, which causes an infection damaging the skin, soft tissue and sometimes bones. Delayed diagnosis and treatment leaves life-long deformities and disabilities. In order to avoid this burden the Road Map for Neglected Tropical Diseases sets as a key target that by 2030 more than $90 \%$ of the cases are diagnosed before the disease is advanced. In this study we set out to develop a dynamic model based on the natural history of Buruli ulcer to aid assessing strategies to address the target set in the Road Map.

Methods We developed a compartmental model with three transitory states accounting for disease severity categories (I to III, from less to more severe), three transitory states consequence of diagnosis and treatment in each category and three terminal states (natural evolution and healing with and without disability). The model was
parameterized in order to simulate realistic endemic scenarios of Buruli ulcer.
Results Focusing in scenarios with different diagnosis and treatment efforts for each category of the disease and evaluating the impact on 2030 target indicators, we observed that if the current efforts are not increased the target will not be achieved. While increasing efforts to diagnose most cases before evolving to Category II or III provides a higher impact, the lack of a reliable diagnostic test for confirmation of BU at community level precludes stressing this strategy.
Conclusion The most interesting approach during the first years of the Road Map would be to increase efforts in targeting cases with Category II lesions. We believe the model can contribute to define strategies for controlling Buruli ulcer.
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Haemoglobin at inclusion in visceral leishmaniasis clinical studies: A systematic review and proposal for an individual patient data meta-analysis
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Biography Prabin Dahal is a post-doctoral researcher based at Infectious Diseases Data Observatory (IDDO), University of Oxford. He has a broad interest in epidemiology of infectious diseases (Malaria and Visceral Leishmaniasis in particular) and his research has primarily focused on delineation of dose-response relationships for commonly used antimalarial drugs through individual participant data meta-analysis and assessment of safety of antileishmanial drugs.
Objective Anaemia is a common haematological sign in patients with visceral leishmaniasis (VL). A systematic review (SR) of all published efficacy studies for antileishmanial drugs was carried out to characterise variations in haemoglobin levels and other haematological parameters used for patient enrolment.
Methods All the articles indexed in Infectious Diseases Data Observatory (IDDO) VL clinical study library were eligible for inclusion. The IDDO VL library is a living SR updated bi-annually and searches the following

