# LAO PEOPLE'S DEMOCRATIC REPUBLIC

#### 1. **DEMOGRAPHICS, GENDER AND POVERTY**

In 2005, the Lao Peoples' Democratic Republic had a population of 5.6 million, a population growth rate of 2.0%, a sparse population density (23.70 persons/km²) with large inter-provincial variations, and an average household size of 5.9. The topography breaks into lowland areas along the Mekong River that depend predominantly on paddy rice, and highland areas that depend on upland rice and the gathering of non-timber forest products for their livelihoods. The population is young (44.10% < 15 years). The nation is largely rural (80%), with the beginnings of a rural-tourban shift.

The most recent census identified 47 distinct ethnic groups. The ethnic Lao comprise 52.5% of the total and predominate in the lowlands, while ethnic minorities predominate in the highlands, although mixing is common. The highlands have more poverty, worse health indicators and fewer services available for multiple reasons, including remoteness, lower education levels, land which is less agriculturally productive and increasing land pressure. Ethnic diversity presents linguistic problems in health care delivery and education. Women have lower literacy rates and girls have lower school completion rates. These gaps are accentuated in the rural and highland areas, where poverty is highest. There is some evidence of decreased treatment-seeking behaviour by women when ill. Female life expectancy is slightly higher than that of males.

The Lao People's Democratic Republic ranks 133rd out of 177 nations on the Human Development Index (2003). The poverty rate fell from 39% in 1997 to 33.5% in 2002. Poverty is higher in remote and highland areas and poverty inversely correlates with road or river access. Seventy-one per cent of the population lives on less than US\$ 2.00 a day and 23% live on less than US\$ 1.00 a day. Inequalities remain important, with the shares of the national economy of the lowest and the highest quintile being 7.6% and 45.0% respectively.

Table 1. Core population and health data (2005)											
Population	[Total]	5 609 997	Life expectancy	[Both]	59.00 (2000)						
	[0-14 years]	44.10% (2000 est)	at birth (years)	[Male]	57.00 (2000)						
	[65+ years]	3.80% (2000 est)		[Female]	61.00 (2000)						
Crude birth rate (per 1000 population)		34.00 (2000 est)	Total fertility rate		4.90 (2000)						
Crude death rate		6.30 (2000 est)	% of population served with safe water	[Total]	63.80 (2004)						
(per 1000 population)				[Urban]	75.00 (2004)						
				[Rural]	60.00 (2004)						
Infant mortality rate		82.20 (2000)	% of population with	[Total]	44.30 (2004)						
(per 1000 live births)	e births)		adequate sanitary facilities	[Urban]	70.00 (2004)						
				[Rural]	35.70 (2004)						
Maternal mortality ratio (per 100 000 live births)		530.00 (2000)									

est- Estimate

#### 2. POLITICAL AND SOCIOECONOMIC SITUATION

#### 2.1 Political situation

The Lao People's Democratic Republic was founded in 1975. The organs of government are the President, the Prime Minister and the National Assembly. The Government operates under the guidance of the Lao Peoples' Revolutionary Party (LPRP) through five-yearly Party Congresses, the Politburo and the Central Committee. The VIIIth Party Congress will be held in early 2006. A National Assembly election will be held in April 2006 with competition among a group of LPRP-approved candidates. Strengthening the rule of law has been emphasized recently, including several health sector laws in respect of public health, curative services, food safety, and drugs and medical devices.

#### 2.2 Economic situation

The World Bank estimated per capita gross domestic product (GDP) was US\$ 390 in 2004, with a 6.3% economic growth rate. Agriculture makes up 48.5% of GDP, industry (mainly hydropower, mining and textiles) 25.5%, and services 26%. Revenue collection remains low at 13.2% of 2004 GDP, causing constraints on public expenditure. External debt is high at 103.4% of GDP. Health expenditure made up 4.4% of total government spending in 2004, with a plan for 5.7% in 2005. Donor spending is planned to make up 73.1% of total public sector health spending in 2005. The bulk of Lao revenue in the public health budget (75.3%) goes to salaries.

## 3. HEALTH SITUATION

#### 3.1 Health trends

Health indicators from the routine health information system are not robust or universal. Therefore, many of the most reliable indicators are from national surveys, most of which were conducted in 2000 and reported in 2001. A national census and a National Reproductive Health Survey were conducted in 2005 but final results were not available in early 2006. A Multiple Indicator Cluster Survey (MICS) will be conducted in early 2006. These three exercises will update many indicators. There is a general perception that there will be further improvements in many indicators.

Maternal mortality fell from 656 to 530 deaths per 100 000 live births from 1995 to 2000, infant mortality from 104 to 82 deaths per 1000 live births, and under-five mortality from 170 to 106 deaths per 1000 live births. The National Health Survey showed children had a two-week fever incidence rate of 2.9%, an ARI incidence rate of 3%, and a diarrhoea incidence rate of 6.2%. The same survey revealed that 21% of deliveries were attended by a trained birth attendant, 12% were in a health facility, and 32% of 12-23-moth year-olds had completed their immunizations. The rate of modern contraceptive use is 28.9% (2000). Safe water is accessible to 63.8% of the population and improved sanitation access to 44.25% (2004).

Malaria is considered the leading cause of morbidity and mortality, with 70% of the population at risk. Programme data showed 76.8% of those at risk using preventive measures in 2004, an increase from 55% in 2003. Malaria drug resistance is increasing and Artemesinen-based combination treatment is being introduced.

Tuberculosis prevalence was estimated at 71 sputum-positive cases/100 000 in 2005. There were 2801 sputum-positive cases reported in 2005, an increase from 2230 in 2004. The DOTS programme reaches 100% of districts. The estimated sputum-positive case detection rate was 70.3% in 2005 and the treatment success rate was 85.8% in 2004.

The Lao People's Democratic Republic is a low HIV prevalence country, with an estimated adult seroprevalence of 0.08% and 1636 HIV-positive individuals detected since 1993. Preliminary results from a second round of second generation surveillance have shown the HIV-positive

seroprevalence in female sex workers increasing from 0.9% in 2001 to 2% in 2005. Chlamydia and gonorrhoea are common in sex workers, with an estimated combined infection rate of 37.6%. A total of 375 patients are currently receiving antiretroviral treatment at a single treatment site.

Outbreaks of dengue occurred again in 2005, with 5446 cases reported. Dengue appears to be moving peripherally, with cases recorded in smaller population centres.

The most recent data show an intestinal helminth prevalence rate of 62% among schoolchildren. A project to scale up school deworming nationally will begin in 2005. There is evidence to show that schistosomiasis is re-emerging in southern parts of the country since control programmes have ended.

The Lao People's Democratic Republic has had no case of severe acute respiratory syndrome (SARS) and no human case of avian influenza. There was an outbreak of avian influenza in poultry in 2004, but none in 2005.

Road accidents are of increasing concern as roads improve and vehicle numbers increase. Mental health issues, particularly drug abuse, are also a growing concern. Other mental health issues include management of seizure disorders and psychoses.

Nutrition is a neglected area, with 40% of children stunted and 48.2% of children and 31.3% of females with haemoglobin levels below 11 g/dl. Universal salt iodinization misses at least 7% of children, and vitamin A supplementation is far from universal. The rate of exclusive breastfeeding at three months of age is only 28.1%.

The rate of obesity, defined as a body mass index of 30 or greater, is only 1.2% nationally, although it is two to three times higher in urban areas. Reliable rates for hypertension and diabetes are not known, although anecdotal reports from urban areas suggest an increase.

#### 3.2 **Health systems**

The state health system is predominant, although a private alternative is growing. There are no private hospitals, but over 2000 private pharmacies and 484 private clinics, mainly in urban areas. The state system is underutilized, especially in the peripheral areas. An effort to increase access through village volunteers and village revolving drug funds has reached 5226 villages.

There are about 18 000 public sector health workers, 70% in the Ministry of Health and 30% under the Ministries of Public Security and Defence. Low salaries and low levels of basic training inhibit health system efficiency.

Estimated per capita health expenditure is US\$ 12.00, about 60% from households, 30% from donors and 10% from the Government. Hospitals are highly dependent on user fees for recurrent expenditure. There are nascent health insurances systems for the formal and nonformal sectors and a civil service scheme is being reformed. Equity funds are under discussion and limited piloting has occurred.

#### 4. NATIONAL HEALTH PLAN AND PRIORITIES

The health priorities of the Lao People's Democratic Republic are articulated in three documents. The Health Strategy to the Year 2020 was promulgated by the VIIth Party Congress in 2001 and has four basic concepts: full health care service coverage and health care service equity; development of early integrated health care services; demand-based health care services; and self-reliant health services.

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This then leads to six health development policies, which are:

- strengthening the ability of providers;
- community-based health promotion and disease prevention;
- hospital improvement and expansion at all levels, including remote areas;
- promotion of traditional medicine, integration of modern and traditional care, the rational use of quality and safe food and drugs, and national pharmaceutical product promotion;
- operational health research; and
- effective health administration and management, self-sufficient financial systems, and health insurance.

The Ministry of Health with JICA support in 2001/02 conducted the Lao Health Master Planning Study. This study identified seven 'precedent programmes' to be implemented and 31 'very high priority' programmes in the fields of planning and management, human resources development, health financing, health education, infectious disease control, primary health care, maternal and child health, nutrition, hospital services, medical laboratory technology, and essential drugs. The need for sectorwide coordination is emphasized.

A third major policy document is the The National Growth and Poverty Eradication Strategy (NGPES). The NGPES focuses on poverty and the poorest districts; 72 poor, 47 poorest, and 10 for initial activities have been identified. The health priorities in the NGPES are:

- information, education and communication for health;
- expansion of the service network for the health promotion of people in rural
- improving and upgrading the capacity of health workers from village to postgraduate level with an emphasis on ethnic minorities, gender balance, and incentives for retaining health workers in areas where there are shortages;
- maternal and child health (MCH) promotion;
- immunization;
- water supply and environmental health;
- communicable disease control;
- control of sexually transmitted infections, including HIV/AIDS;
- village revolving drug fund development;
- food and drug safety;
- promotion of traditional medicine integrated with modern medical treatment;
- strengthened sustainability, including financing, management, quality assurance and legal framework.

To a large extent all of these documents will be superceded by the Sixth National SocioEconomic Development Plan (2006-10) (NSEDP), which will be considered and promulagated by the VIIIth Party Congress and the National Assembly in the first half of 2006. The NGPES has been fully integrated into the draft 6th NSEDP and serves as its core. The draft has been presented to and discussed widely with both internal and external partners, a first in the Lao People's Democratic Republic. There is a large funding gap for implementation of the draft 6th NSEDP in all sectors, including health. As part of the policy framework with the Bretton-Woods institutions, the Government has also pledged to increase health spending.

The health sector is extremely project- and donor-dependent, which has often led to competing and overlapping donor demands. The Minister of Health has called for more integrated approaches, particularly for MCH and immunization, decentralized service delivery methods, improved methods of health care financing, a unified and simplified health information system, and an emphasis on quality improvement in the next five years, rather than quantity improvement, which was emphasized over the past five years.

A new Constitutional article (2004) obligates the Government to improve and extend the health network; to improve disease prevention; to create conditions so all people receive health care, especially mothers, children and the poor; and to legalize private investment in health services.

#### 5. **MAJOR INFORMATION SOURCES**

Preliminary report on the population and household census 2005. National Statistical Center, 2005.

Sixth National Socio Economic Development Plan (2006-2010), Committee for Planning and Investment.

Basic Statistics 2003. National Statistical Center, 2004.

United Nations Development Assistance Framework for the Lao People's Democratic Republic 2002-2006. New York, UNDP, July 2002.

United Nations Common Country Assessment for the Lao People's Democratic Republic 2005. Government of Lao People's Democratic Republic and the United Nations System, September 2005

Lao Reproductive Health Survey 2000 . State Planning Committee/National Statistical Center

United Nations Common Country Assessment for the Lao People's Democratic Republic 2000. Government of Lao People's Democratic Republic and the United Nations System, December 2000.

The National Growth and Poverty Eradication Strategy. Committee for Planning and Investment, 2004.

Millennium Development Goals Progress Report, Lao People's Democratic Republic. January 2004.

Results from the Population Census 1995. State Planning Committee/National Statistics Center, April 1997.

Annual Report 2003. Bank of the Lao People's Democratic Republic, 2004

Annual Report 2004. Bank of the Lao People's Democratic Republic, 2005

Statistical Report 2000. Statistics Department, Ministry of Health, 2000.

Health Status of the People in the Lao People's Democratic Republic: Report on the National Health Survey. January 2001.

TB Statistics. National TB Center, February 2004.

HIV Surveillance Survey and Sexually Transmitted Infection Periodic Surveillance Survey . Lao People's Democratic Republic, 2001.

Mental Health Situation Analysis in the People's Democratic Republic. Ministry of Health/WHO, December 2002.

Survey data from Ministry of Health/WHO/Korean Association for Health Promotion. Lao People's Democratic Republic, 2000-2003.

The Study on Improvement of Health and Medical Services in the Lao People's Democratic Republic – Progress Report I. Ministry of Health/JICA Study Team, September 2001.

Hospital Costing Study. Ministry of Health Planning and Budgeting Department and WHO, January 2004.

Lao Health Master Planning Study. Ministry of Health/JICA Study Team, November 2002.

Health Strategy up to the Year 2020 - A Discussion Paper for the Donor Round Table Meeting. Ministry of Health, May 2000.

Lao Expenditure and Consumptions Survey 2002/03. National Statistical Center, March 2004.

Official Gazette, 11th Year. Ministry of Justice, July 2004.

Official Gazette, 12th Year. Ministry of Justice, 2005.

Lao People's Democratic Republic public expenditure review 2005, intermediary draft reports. World Bank, 2005-06.

Lao People's Democratic Republic 2004 Article IV consultation staff report. International Monetary Fond, 2005.

Lao People's Democratic Republic Economic Monitor. World Bank, October 2005.

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Grant Performance Report for Global Fund. CMPE, Ministry of Health, October 2004.

Report on the Roundtable Process. National Round Table Process Steering Committee, November 2004.

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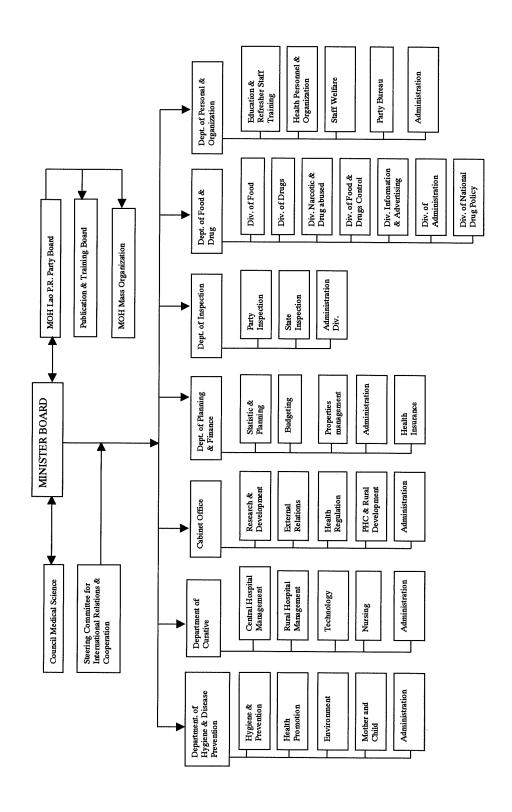
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# WESTERN PACIFIC REGION HEALTH DATABANK, 2006 Revision

	INDICATORS		DATA		Year	Source
		Total	Male	Female		
1	Area (1 000 km <sup>2</sup> )	236.80			2005	21
2	Estimated population ('000s)	5609.90	2796.40	2813.60	2005	21
3	Annual population growth rate (%)	2.00			2005	21
4	Percentage of population					
	- 0–14 years	44.10	45.60	42.90	2000r	1
	- 65+ years	3.80	3.70	3.90	2000r	1
5	Urban population (%)	20.70			2000r	1
6	Crude birth rate (per 1 000 population)	34.00			2000 est	2
7	Crude death rate (per 1 000 population)	6.30			2000 est	2
8	Rate of natural increase of population (% per annum)	2.77 <b>a</b>			2000	2
9	Life expectancy (years)					
	- at birth	59.00	57.00	61.00	2000	2
	- Health-adjusted life expectancy (HALE) at age 60		9.60	10.10	2002	13
10	Adult literacy rate (%)	74.00	85.00	64.00	2003	16
11	Neonatal mortality rate (per 1 000 live births)	36.20			2000	2
12	Infant mortality rate (per 1 000 live births)	82.20			2000	2
13	Under-five mortality rate (per 1 000 live births)	106.90 <sup>h</sup>			2000	2
14	Total fertility rate (women aged 15–49 years)			4.90	2000	2
15	Maternal mortality ratio (per 100 000 live births)			530.00	2000	2
16	Percentage of newborn infants weighing at least 2500 g at birth	82.00			1998	8
17	Prevalence of underweight children under five years of age	40.00			2000	5
18	Percentage of pregnant women with anaemia					
19	Immunization coverage for infants (%)					
	- BCG	60.00		***	2004	19
	- DTP3	45.00			2004	19
	- OPV3	46.00			2004	19
	- Measles	36.00			2004	19
	- Hepatitis B III	45.00			2004	19
20	MCH coverage (pregnancies, deliveries, infant care)					
	- Percentage of pregnant women cared for by skilled health personnel			23.00	2000	2
	- Percentage of pregnant women immunized with tetanus toxoid (TT2)			37.00	2003	19
	- Percentage of deliveries at home by skilled health personnel (as $\%$ of total deliveries)			9.00	2004	17
	- Percentage of deliveries in health facilities (as % of total deliveries)			12.00	2000	2
21	Percentage of women in the reproductive age group using modern contraceptive methods			28.90 <sup>h</sup>	2000	2
22	Condom use rate of the contraceptive prevalence rate			0.50	2000	2
23	HIV prevalence among 15–24 year-old pregnant women					
24	Number of children orphaned by HIV/AIDS ab					

# COUNTRY HEALTH INFORMATION PROFILE

- per capita total expenditure on health (in US\$)  Government expenditure on health  - amount (in million US\$)  - general government expenditure on health as % of total expenditure on health  - general government expenditure on health as % of total general government expenditure  - general government expenditure on health as % of total general government expenditure  External source of government health expenditure  - external resources for health as % of general government expenditure on health  Private health expenditure  - private expenditure on health as % of total expenditure on health  Exchange rate in US\$ of local currency is: 1 US\$ =  10 585.5 kips 2004 24  15.24  16 2003-2004 15.24  17 2003-2004 15.24  18 2003-2004 15.24  18 2003-2004 15.24  19 2003-2004 15.24  2003-20	INDICATORS						DATA		Year	Source
water source					То	tal	Urban	Rural		
27   Proportion of the population using solid fuels for cooking or heating (%)   .	25		able access	to an improved	I	63.80	75.00	60.00	2004	14
Proportion of households with access to secure tenure	26	Proportion of population with access to	improved sa	nitation		44.30	70.00	35.70	2004	14
Proportion of vehicles using unleaded gasoline (%)	27		J	96.00			2000	3		
Nealth care waste generation (metric tons per year)	28	Proportion of households with access								
31   Human development index	29	Proportion of vehicles using unleaded								
Rate of growth of per capita GDP (%)   6.40	30	Health care waste generation (metric to								
Rate of growth of per capita GDP(%)   6.40   .	31	Human development index				0.54			2003	11
Health expenditure   Total health expenditure   - amount (in million US\$)   63.25 \ 2004   10   15.23   - per capita total expenditure on health (in US\$)   11.50   2004 est   10   10   2003-2004   15.23   - per capita total expenditure on health (in US\$)   11.50   2004 est   10   11.50   2004 est   10   11.50   2004 est   10   10   2003-2004   15.24   - amount (in million US\$)   17.00   2003-2004   15.24   - amount (in million US\$)   15.24   - amou	32	Per capita GDP at current market price	s (US\$)		3	390.00 h			2004	22
Total health expenditure	33	Rate of growth of per capita GDP (%)				6.40 h			2004	22
- amount (in million US\$)	34	Health expenditure								
- total health expenditure on health as % of GDP		Total health expenditure								
- per capita total expenditure on health (in US\$)		- amount (in million US\$)						63.25 k	2004	10
Covernment expenditure on health		- total health expenditure on health as	% of GDP					2.72	2004	15,23,24
- amount (in million US\$)		- per capita total expenditure on health	(in US\$)					11.50	2004 est	10
- general government expenditure on health as % of total expenditure on health - general government expenditure on health as % of total general government expenditure  External source of government health expenditure  - external resources for health as % of general government expenditure on health  Private health expenditure  - private expenditure on health as % of general government expenditure on health  Private health expenditure on health so % of total expenditure on health  Private health expenditure on health so % of total expenditure on health  Private expenditure on health as % of total expenditure on health  Exchange rate in US\$ of local currency is: 1 US\$ = 10 585.5 kips 2004 24  35 Health insurance coverage as % of total population  INDICATORS  DATA  Year Source  Number  Rate per 10 000 population  Health workforce • n  - physicians 1283 226 2005 25  - dentists 83 0.15 2005 25  - nurses 5291 m 9.32 2005 25  - nurses 5291 m 9.32 2005 25  - midwives		Government expenditure on health								
On health   - general government expenditure on health as % of total general government expenditure   External source of government health expenditure   - external resources for health as % of general government expenditure on health   - september 2003-2004   15,24		- amount (in million US\$)						17.00	2003-2004	15,24
External source of government health expenditure   - external resources for health as % of general government expenditure on health   - external resources for health as % of general government expenditure on health   - expen			•			26.90	2003-2004	15,24,10		
- external resources for health as % of general government expenditure on health  Private health expenditure  - private expenditure on health as % of total expenditure on health  Exchange rate in US\$ of local currency is: 1 US\$ = 10 585.5 kips 2004 24  35 Health insurance coverage as % of total population < 2.00 2005 10  INDICATORS  DATA  Year  Source    Total   Male   Female   Total   Male   Female			I			4.40	2003-2004	15,24		
expenditure on health   Private health expenditure   Private health expenditure   Private health expenditure on health   S5.60   2002   9		External source of government health expenditure								
- private expenditure on health as % of total expenditure on health  Exchange rate in US\$ of local currency is: 1 US\$ = 10 585.5 kips 2004 24  35			t			58.20	2003-2004	15,24		
Exchange rate in US\$ of local currency is: 1 US\$ =		Private health expenditure								
State   Stat		- private expenditure on health as % of	total expenditu	re on health				55.60	2002	9
Number   Rate per 10 000 population   Popu		Exchange rate in US\$ of local currency	is: 1 US\$ =					10 585.5 kips	2004	24
Total   Male   Female   Total   Male   Female	35	Health insurance coverage as % of total	l population					<2.00	2005	10
Number   Rate per 10 000 population		INDICATORS			D	ATA			Year	Source
Health workforce c, n			Total	Male	Female		1 1			
- physicians 1283 2.26 2005 25  - dentists 83 0.15 2005 25  - pharmacists 276 0.49 2005 25  - nurses 5291 9.32 2005 25  - midwives				Number		Rate	per 10 000 pop	ulation		
- dentists 83 0.15 2005 25 - pharmacists 276 0.49 2005 25 - nurses 5291 m 9.32 2005 25 - midwives	36	Health workforce c, n								
- pharmacists 276 0.49 2005 25  - nurses 5291 m 9.32 2005 25  - midwives		- physicians	1283			2.26			2005	25
- nurses 5291 m 9.32 2005 25  - midwives		- dentists								
- midwives		- pharmacists								
- other nursing/ auxiliary staff		- nurses	5291 m			9.32			2005	25
- other paramedical staff(e.g. medical assistants, laboratory technicians, X-ray technicians)  - other health personnel (health inspectors, assistant sanitarians,										
medical assistants, laboratory technicians, X-ray technicians)  - other health personnel (health inspectors, assistant sanitarians,		,								
inspectors, assistant sanitarians,		medical assistants, laboratory	1722			3.07			2005	25
		inspectors, assistant sanitarians,	429			0.76			2005	25
37 Yearly new graduates – physicians 53 2005 25	37	Yearly new graduates – physicians	53						2005	25
38 Yearly new graduates – nurses 30 <sup>g</sup> 2005 25	38	Yearly new graduates – nurses	30 g						2005	25

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	INDICATORS DATA							Year	Source
		Total	Male	Female	Total	Male	Female		
39	39 Five leading causes of morbidity Number of cases Rate per 100 000 population b								
	1. Malaria	104 434			4083.17			2000	5
	2. Pneumonia	18 096			728.00			2000	5
	3. Gastritis	17 132			690.00			2000	5
	4. Influenza	12 987			523.00			2000	5
	5. Diarrhoea	12 334			496.49			2000	5
40	Five leading causes of mortality	Nu	mber of cases		Rate pe	r 100 000 popu	ılation <sup>b</sup>		
	1. Malaria	996			40.09			2000	5
	2. Pneumonia	83			3.34			2000	5
	3. Diarrhoea	34			1.36			2000	5
	4. Heart failure	34			1.36			2000	5
	5. Injury	33			1.32			2000	5
41	Selected diseases under the WHO- EPI	Nu	mber of cases		N	umber of death	าร		
	- Diphtheria	9			2			2005	18
	- Pertussis (whooping cough)	120			4			2005	18
	- Tetanus	21			1			2005	18
	- Neonatal tetanus	14			3			2005	18
	- Poliomyelitis	1 <sup>e</sup>						2004	19
	- Hib Meningitis	264			4			2005	18
	- Measles	1491						2004	19
	- Mumps								
	- Rubella								
	- Congenital rubella syndrome								
42	Selected communicable diseases	Number of cases aa		N	umber of death	าร			
	Hepatitis viral	632			0	0	0	2002	6
	- Type A	10			0	0	0	2002	6
	- Type B	61			0	0	0	2002	6
	- Type C								
	- Type E								
	- Unspecified	495			0	0	0	2005	18
	Cholera	1272			1			2002	6
	Typhoid fever	1573			1			2005	18
	Encephalitis	16			0	0	0	2005	18
	Plague	0	0	0	0	0	0	2005	18
	Syphilis								
	Gonorrhoea								
	Leprosy	156						2003	6
	Malaria	16 183			105			2004	6
	Dengue/DHF	3075 h			10 h			2004	6
43	Malaria		evalence rates	·		Death rates			
	- Rates associated with malaria (per 100 000 population)	280.00			1.81			2004	6
	- Proportion of population in malaria-risl	k areas using e	ffective malaria	prevention n	neasures <sup>f</sup>		76.80	2004	20
	- Proportion of population in malaria-risk areas using effective malaria treatment measures P								

# COUNTRY HEALTH INFORMATION PROFILE

	INDICATORS	D		PATA			Year	Source	
		Total	Male	Female	Total	Male	Female		
44	Tuberculosis	Nu	mber of cases		N	umber of death	าร		
	- All types	3173						2004	6
	- New pulmonary tuberculosis (smear-positive)	2241						2004	6
	, ,	Prevalence rates			Death rates				
	- Rates associated with tuberculosis (per 100 000 population)	318.00			25.00			2004	6
		D	etection rates			Success rates			
	- Proportion of tuberculosis cases detected and cured under directly observed treatment, short-course (DOTS)	55.00			79.00 (2003)			2004	6
		Nu	ımber of cases		N	umber of deatl	าร		
45	Acute respiratory infections								
46	Diarrhoeal diseases								
47	Cancers								
	All cancers (malignant neoplasms only)								
	- Trachea, bronchus, and lung								
	- Stomach								
	- Colon and rectum								
	- Lip, oral cavity and pharynx								
	- Liver								
	- Cervix								
	- Leukaemia								
48	Circulatory								
	All circulatory system diseases								
	- Ischaemic heart disease					•••			
	- Acute myocardial infarction								
	- Rheumatic fever and rheumatic heart diseases								
	- Cerebrovascular diseases								
	- Hypertension								
49	Maternal causes								
	- Haemorrhage								
	- Abortion								
	- Eclampsia								
	- Sepsis								
	- Obstructed labour								
50	Diabetes mellitus								
51	Mental disorders								
52	Injuries								
	- All types								
	- Motor and other vehicle accidents								
	- Suicide								
	- Homicide and violence								
	- Occupational injuries								
53	Proportion of population with access sustainable basis	to affordable	e essential dr	ugs on a					

INDICATORS		D	Year	Source	
54	Health infrastructure	Ith infrastructure Number Number Number of beds			
	Public health facilities				
	- General hospitals	21 °	2555	2005	25
	- Specialized hospitals	3 d	160	2005	21
	- District/first level referral hospitals	127	2366	2005	21
	- Primary health care centres	746	1658	2005	21
	Private hospitals	0	0	2005	21

#### Notes:

#### Red text

Millennium Development Goals (MDG) indicators

... Data not available

#### est Estimate

- r Revised reference year
- Figure refers to number of new reported cases.
- b Proxy indicator for MDG indicator 20: Ratio of school attendance of orphans and school attendance of non-orphans age 10-14 years.
- Computed by Health Information and Evidence for Policy Unit of the WHO Regional Office for the Western Pacific.
- Calculated by Statistical Division of Ministry of Health.
- Refers to all hospitals, ministries and health facilities at central, regional, provincial, and district level.
- Refers to specialized hospitals at central level.
- e Vaccine-derived polio-virus.
- Proportion of population in malaria risk areas protected by impregnated bed nets reflect the status of the distribution of impregnated bed nets in malaria risk areas. It is assumed, that 70% of the Lao population is living in malaria risk areas.
- Includes only nurses trained at university, due to a reformulation of the curricula there has not been any graduation of staff at nursing schools since 2 years. The number of graduates in 2006 is estimated to rise up to 600.
- h Revised data
- Proportion of households
- k | Est. on an average 11.5 US\$ expenditure per capita and a total 2004 population of 5,499,997 inhabitants (calculated on data of National Census 2005)
- Est. Based on a GDP of Kip 24,621.2, and an annual average exchange rate of 10,585.5 Kip per US\$
- m Including medical assistants
- Includes medical staff of Ministries of Health, Public Security and Defence; Does not segregate between administrative (+/- 10%) and curative staff; Does not include non medical staff associated to the health system (maintenance, management, accounting, etc).
- o Corresponds to the technical auxiliary nurses (low level trained staff)
- Treatment is measured by the proportion of children ages 0–59 months who were ill with the fever in the two weeks before the survey and who received appropriate antimalarial drugs.

## Sources:

- 1 | Statistical Yearbook 2005. National Statistical Centre, July 2005
- 2 Lao Reproductive Health Survey 2000. National Statistical Centre
- 3 Millennium Development Goals Progress Report. Lao People's Democratic Republic, January 2004
- 4 National Statistics Centre, 2002
- 5 National Health Survey. National Statistical Centre and NIOPH, January 2001
- 6 WHO Regional Office for the Western Pacific, data received from technical units
- 7 Association of South-East Asia Nations www.aseansec.org
- 8 United Nations Country Indicators Lao People's Democratic Republic. Last amendment, 14 February 2000
- 9 Lao Health Master Planning Study. Ministry of Health, November 2002
- 10 Information furnished by WHO Representative in the Lao People's Democratic Republic, February 2006
- 11 Human development report 2005. New York, United Nations Development Programme, 2005 www.undp.org
- 12 Urban and Rural Areas 2003. Department of Economic and Social Affairs Population Division, United Nations, 2004
- 13 The World health report 2004. Changing history. Geneva, World Health Organization, 2004.
- 14 Report 2004. Water and Sanitation Centre of the Lao People's Democratic Republic.
- 15 Official gazette. State Budget Revenue-Expenditure Implementation of FY 2003-2004. Ministry of Justice, January 2006
- 16 Lao Expenditure and Consumption Survey 2002/03. National Statistical Centre, March 2004.
- 17 Report 2004. Mother and Child Centre of the Lao People's Democratic Republic.
- 18 Weekly epidemiological surveillance report, National Center for Laboratory and Epidemiology, January 2006

# COUNTRY HEALTH INFORMATION PROFILE

- 19 Report 2004. Expanded programme on immunization project of the Lao People's Democratic Republic, WHO/UNICEF joint reporting, April 2005
- 20 National Center for Malariology, Parasitology and Entomology
- 21 Population and Housing Census Year 2005, Preliminary Report, National Statistics Centre, Lao PDR, September 2005
- 22 Lao PDR Economic Monitor, World bank, October 2005
- 23 Annual Report 2004, Bank of Lao PDR, October 2005
- 24 Comparative table of exchange rates, Statistic Institute of Quebec 2006 <a href="http://www.stat.gouv.qc.ca/">http://www.stat.gouv.qc.ca/</a>
- 25 National Ministry of Health, Department of Personal and Organization