Working with the NTP: Pleasure or Pain?

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ZANKLI MEDICAL CENTRE, ABUJA, NIGERIA

Private Medical Hospital, founded 1990, multi-disciplinary, 40 beds. Staff strength of 200, 24 FT doctors, 14 consultants, 24 hour service, special interest in research

www.zankli.com
Journey into the world of TB

PhD (2003-2006) – LSTM, UK

Improving the Diagnosis of Pulmonary TB in resource constrained settings and the Role of micronutrients in the treatment of pulmonary TB in Abuja, Nigeria.

(1320 enrolled and cultured 1186 samples)

2003
- Set up a TB laboratory
- Purchased MGIT BACTEC 960
- First contact with NTBLCP
- Team of community health extension workers (CHEWS) trained to identify adults with chronic cough, sputum collection and dispensed Anti-TB drugs in 8 hospitals

Start of the DOTS programme in Abuja-2003
The Pioneer team for DOTS in Abuja
Continued relationship with the NTBLCP

- Need to sustain DOTS centres.

- DOTS centres maintained by ZMC and gradually taken over by NTBLCP
- One of 8 original centres and some surrounding hospitals without TB laboratories still retained
The passion

- First paper published in Tropical Doctor 2004
- Fascination to publish more papers
- First Union meeting 2005
- Exposure to global TB issues
- Decision to do more for TB
- Continued TB activities from end of 2005
- Trip to SA for DR training on BACTEC 2006
- First lab to give MDR-TB data nationally
Zankli Research Laboratory

- Non-for-profit
- 4 ZMC + 2 NTBLCP laboratory scientists
- 1 data officer
- Mostly TB research
- Multiple PhD and MSc research projects
- Research collaboration with national and international centres
- 1 of 3 labs contributing to the national TB and national MDR-TB surveys (funded by USAID/GF)
- Training of laboratory staff on TB lab work
Zankli Research Laboratory 2012

Microscopy area

Processing area

TB Culture area

Additional incubators, -80°C/storage
“TDR is using the Zankli Research Laboratory for mycobacterial culture and drug sensitivity testing for its ongoing trial aimed at generating evidence on safety and efficacy of a four-drug fixed-dose combination therapy (4FDC) compared with the loose or single-dosed anti-TB pill. “

TDRnews No 85, World TB day, May 2010 - On the move with innovation,
“Zankli research laboratory played a key role in TDR trials into low-cost light-emitting diode (LED) adaptors for microscopes to make smear diagnosis easier, and into "front-loaded" microscopy to speed diagnosis.

Largely as a result of the TDR trials, WHO endorsed the use of LED fluorescence microscopy and front-loaded sputum specimen collection.”

On the move with innovation, TDRnews No 85, World TB day, May 2010

Study coordinators for Front-loaded microscopy trial
Lawson L, Yassin MA, Ramsay A, Olajide I, Thacher TD, Davies PD, Squire SB, Cuevas LE. Microbiological validation of smear microscopy after sputum digestion with bleach, a step closer to a one-stop diagnosis of pulmonary tuberculosis. Tuberculosis. 2006


Lawson L, Yassin MA, Ramsay A, Emenyonu EN, Thacher TD, Davies PDO, Squire SB, Cuevas LE. Short-term bleach digestion of sputum in the diagnosis of tuberculosis in patients co-infected with HIV. Tuberculosis 2007


Lawson L, Yassin MA, Thacher TD, Olatunji OO, Lawson JO, Akingbogun TI, Bello CSS, Davies PDO. Clinical presentation of adults with Pulmonary Tuberculosis with and without HIV infection in Abuja, Nigeria. Scan J Inf Dis. 2007


Lawson L, Ramsay A, Onuoha AN, Yassin, MA, Anderson de Cuevas, Theobald, S, Davies PDO, Cuevas LE. Yield of smear microscopy and radiological findings of male and female patients with Tuberculosis in Abuja, Nigeria. Tuberculosis Research and Treatment ,2010

Lawson L, Thacher TD, Yassin MA, Onuoha AN, Usman A, Emenyonu N, Shenkin A, Davies PDO, Cuevas LE. Randomized controlled trial of zinc and vitamin A as co-adjuvants for the treatment of pulmonary tuberculosis. Tropical Medicine & International Health, Ms. No. TMIH-D-10-00103R1
Level of collaboration between Zankli and NTBLCP

- Technical group on health sector response on HIV & AIDS in Nigeria
- National TB/HIV working group
- FCT- TBLCP Programme- Focal Person
- Technical Committee MDR-TB & TB Prevalence Studies
- Ministerial Task Team on TB
- Nigeria Stop TB Partnership
- National TBL Strategic Plan 2010-2015/JIMM

Mutual Relationship
- Dedicated driver to Wuse Hospital and surrounding clinics and hospitals for sputum collection and return of results of SM and culture
- Process samples from failed Rx pts for culture and DST nationally
- Training of staff of NTBLCP on equipment use
- Generation of MDR-TB data for national and international reports
- Lecture series in tropical medicine in collaboration with LSTM
TB Reach Project launch, by Minister of state FCT and field work
Succour Foundation 2008

NGO
Not-for-profit foundation
Initiative of ZMC

Aims to provide succour and hope to millions suffering from TB, HIV/AIDS and Malaria.

Training of Doctors, Nurses and Laboratory Scientists on DOTS and TB control

www.succourfoundation.org
Objectives

- To provide Voluntary Confidential Counseling and Testing (VCCT) services and comprehensive care and support services for patients with TB and HIV infection.
- To promote high quality quantitative, qualitative and operational research on TB and HIV/AIDS.
- To collaborate with relevant government agencies and other NGOs with the aim of improving Tuberculosis, Malaria, and HIV/AIDS management and control.
The Pleasure

- Contributions to medical knowledge with published articles
- Availability of research subjects
- Working with present TB administration
- New equipment donation
- Attaining reference laboratory status
- Opportunity for EQA
- International recognition
The Pleasure

- National and International projects
- Registered centre for CME
- Partnership with LSTM and NTBLCP in new initiatives (TB Reach, EDTCP)
- 1 of 6 laboratories being supported for the SLMTA accreditation by IANPHI/CDC in Nigeria.
The Pains

- Rapid turnover of national TB coordinators
  - uneasy relationship with some
- Financing
  - Equipment procurement and maintenance
  - Staff salary, training and retraining
  - Reagents and material
  - Power supply
- Too many meetings without much action
- Lack of sustainability of programmes
- Politics
Recommendations

- Treatment in communities by CHEWS
- Training and involvement of more private hospitals and clinics
- Treatment at all PHC centres
- Adequate M&E
- Sustainability of programmes
- Increased public awareness
- Health promotion
- Identification and encouragement of organizations and groups with interest and passion
Conclusion

- Collaboration is possible
- Can be fruitful but not always easy
- Partners need to see potential gains for participation
- Private sector can bring in skills and flexibility to support the programme
- It is unrealistic to expect the provision of free services by for-profit organisations, but with imagination, there are ways to make it work!
- Increased recognition and international profile is also important for private centres
Thank you