Scaling up collaborative TB/HIV activities: achievements, challenges, and opportunities in Viet Nam

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Viet Nam and HIV: Basic facts

Population & Epidemic

- Population (2013): 90 million
- LEB: 73.5 yrs
- IMR: 14.6 per 1,000 lbs
- MMR: 62 per 100,000 lbs

HIV/AIDS

- Estimated HIV+ (2013): 256,000
- Reported HIV+ prevalence: 0.25%
- Concentrated epidemic, primarily driven by people who inject drugs (PWID), their sexual partners and female sexual workers
Reported HIV+ population by year
Newly annual reported HIV+, AIDS and Deaths

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HIV and TB overview

- **HIV**
  - Estimated HIV+ (2013): 256,000
  - Reported HIV+ prevalence: 0.25%

- **Tuberculosis**
  - TB all forms (estimated): 130,000
  - HIV associated TB (estimated): 9,300
  - Rank 12 in 22 TB high burden countries.
Guidelines for Collaboration between National TB and HIV/AIDS Control Programs

- Central level: TB/HIV Coordination Steering Board
- 53/63 provinces: Provincial TB/HIV Steering Boards
- Collaborative mechanisms between two programs
- Technical guidelines for TB/HIV interventions
Priority HIV/TB interventions in Viet Nam

1. Prevention
   - Early HIV diagnosis
   - Timely ART
   - IPT

2. Screening and diagnosis
   - Intensive TB case finding in HIV
   - GeneXpert
   - HIV testing in TB patients

3. Treatment
   - ART+TB treatment

4. Integrated and Decentralised TB/HIV service delivery
1. TB prevention in PLHIV

Early diagnosis and timely ART to prevent TB

- Expand ART coverage (67% coverage with CD4<350 cells/mm³).
- Early ART initiation
  - Outreach to key populations
  - Integrate HIV testing into TB, ANC and methadone maintenance (MMT)
  - Decentralize HIV testing to PHC level
- Reduce late ART initiation (CD4 <100 cells/mm³): From 63% (2009) to 37% (2013)

Source: National HIV program 2013
1. TB prevention in PLHIV

Isoniazid preventive therapy (IPT)

- TB-screening in PLHIV using 4 symptom-based algorithm to rule out active TB
- Provide IPT for those without contraindication
- Started IPT in 2009; now nearly 20,000 HIV/AIDS cases treated with IPT.

Source: National HIV program 2013
2. Screening and diagnosis
Intensified TB case-finding in HIV settings

- TB screening at every visit to HIV clinic
  - Clinical screening and clinical investigation
  - Suspected cases ➔ Further investigation at TB settings

  - Located in high burden TB, TB/HIV and MDR-TB provinces
  - Effective for timely diagnosis of HIV/TB cases and MDR-TB
2. Screening and diagnosis
HIV Testing and Counselling for TB patients

- Expand and scale-up provider-initiated HTC (PITC) in TB settings.
- Around 60-70% of TB patients received PITC services.
- HIV positive among TB patients is 4.27% (2013).
3. Treatment

ART and TB treatment for HIV/TB patients

- About 60% of TB/HIV patients are treated with ART and TB treatment (higher compared to previous years, but still far from target of 100%).
4. Integrated Service Delivery

- **Province**
  - HIV Center
  - TB Center
  - Two separate centers or integrated in one Provincial Preventive Health Center

- **District**
  - HIV Unit
  - TB Unit
  - Two Units integrated in one District Health Center (DHC)

- **Commune**
  - HIV + TB
  - All integrated in one Commune Health Center (CHC), including TB-DOTS, ART and follow-up
4. Integrated service delivery
Intergrated services for key populations

- “One-Stop model”: Increase number of districts providing PITC, ART, MMT, needle/syringe and TB-DOTS.

- Case study: At Long Bien District Health Center (Hanoi) in 2013:
  - 9/9 TB/HIV patients received both ART and TB-DOTS
  - 33 HIV/AIDS patients received both ART and MMT
Lessons learned

- Active coordination body at central level plays critical role.
- Need clear and specific guideline to lead the coordination.
- Joint M&E is very important for TB/HIV collaboration.
- Focus interventions in areas with high burden of both TB and HIV/AIDS.
- Good link between TB settings and HIV/AIDS settings improves timely ART for TB/HIV patients.
- TB and HIV/AIDS should be both highly integrated in the existing healthcare system and decentralised to the PHC level.
Thank you