HIV/TB Epidemiology and progress in implementation of HIV/TB collaborative activities

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Outline of presentation

- Global and AFRO TB/HIV epidemiology
- Regional TB/HIV targets and resolutions
- Progress in implementation
- Enablers factors for nationwide scale-up
- Key challenges
- Conclusions
Estimated TB incidence rate, 2006

Highest estimated incidence of TB is in Sub-Saharan Africa
TB Incidence rates falling slowly globally

Africa is with the highest incidence rate largely due to the HIV epidemic
Regional TB/HIV targets and resolutions

- Abuja Declaration (2006):
  - 100% of TB patients have access to HIV testing and counselling services by 2010
  - 100% of eligible HIV positive TB patients access anti-retroviral treatment by 2010

- TB declared as regional emergency in 2005

- TB & HIV: A Regional Strategy to control a dual epidemic in 2007
AFRO STRATEGY TO CONTROL A DUAL EPIDEMIC

• Strengthen an improved mechanisms of collaboration between the TB and AIDS programmes
• Increase prevention, case finding and treatment of TB among PLWHA.
• Improve access to HIV testing and counseling among TB patients and suspect,
38% of all TB patients were tested for HIV in Africa in 2007
42% of estimated PLHIV with TB patients were detected in Africa.
Collaborative TB/HIV activities, 2002–2007, AFRICAN REGION

Diagnosis and treatment of HIV in TB patients

<table>
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<th>Year</th>
<th>Tested for HIV</th>
<th>HIV-positive</th>
<th>CPT</th>
<th>ART</th>
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<td>2006</td>
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<td>248.8</td>
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Proportion of TB patients tested for HIV, 2007

Nationwide scale-up of HIV testing for TB patients is possible
HIV positive TB case detection and provision of CPT and ART
AFRICAN REGION 2007

ART coverage is very low
TB screening and IPT in Africa, 2002-2007

Diagnosis, treatment and prevention of TB in people with HIV

Very low implementation of Three Is even in successful countries
Enablers for nationwide scale-up

• National plans and targets
• Participatory development of national policy
• Revision of TB and HIV technical manuals and guidelines
• National policy on HIV testing (PICT)
• Revision of recording and reporting formats

Nationwide scale-up of TB/HIV is possible
Other critical enablers

• Intensive, continuous training and supportive supervision

• Stakeholders engagement and community mobilization

• Effective and constant supply of commodities
Key challenges

- Poor health systems and health workforce
- Failure to recognise the importance of TB and HIV
- Lack of integration of services
- Limited diagnostic capacity
- Non existent TB infection control services
- Centralised ART vs decentralised TB services
- Difficulty about IPT
Conclusions

- Encouraging and rapid progress in implementation of HIV services for TB patients
- There is mismatch between policy and implementation in most countries
- Implementation of Three Is for HIV/TB is very low even in successful countries
- The experience of expanding HIV services for TB patients should be used to accelerate the implementation of the Three Is