CURRENT SITUATION

Tuberculosis (TB) is a major public health problem in the Philippines.

- An estimated 260,000 people developed active TB in 2011, of these around 25% were not detected or notified.
- The TB mortality rate remains high at 29 per 100,000 population.

THE WHO-CIDA INITIATIVE IN THE PHILIPPINES

- The project was initiated in early 2010, with the aim of addressing low case detection.
- Metro Manila or National Capital Region, the second most populous among the 17 regions in the country, was selected for implementation of CIDA project activities.
- In 2008, 11.5% of the smear positive cases in the country were notified by Metro Manila. It is estimated that 33% of TB cases remain undetected in this region.

“Over 10,000 additional TB cases were detected in the Philippines through this Initiative, predominantly through hospital engagement. The target set by the Initiative of detecting 8620 additional TB cases has been exceeded over 6 months before the end of the project.”

Dr Rosalind Vianzon, National TB Control Programme Manager, The Philippines

INTerventions

1. Engaging big public hospitals

- A large proportion of people with TB present themselves to hospitals. However, many TB cases are missed due to: weak adherence by hospitals to the national diagnosis and treatment protocols; lack of coordination among hospital units, and between hospitals and peripheral health centres; and inadequate engagement of patients. In the Philippines a crucial bottleneck is the loss of patients during referral within the hospital or external referral to health centres.

2. Systematic household contact investigation

- Increased and early detection of TB cases, especially among children, can be facilitated through systematic household contact investigation.

3. Systematic TB screening of people with diabetes

- Like HIV, diabetes increases the risk of getting TB and systematic screening of patients in diabetes clinics can yield additional TB cases.

4. Intensifying case finding among the urban poor

- The urban poor have a higher prevalence of TB, low access to health services and poor treatment outcomes due to factors such as poverty, overcrowding and inadequate nutrition. Increased and early detection of TB cases can be facilitated through intensified TB case finding in this high-risk group.
IMPLEMENTATION STEPS
To launch the interventions the following steps were taken:

- Development of protocols and standard operating procedures for the interventions.
- Advocacy and development of linkages and dialogue between hospitals and health centres.
- Sensitization, orientation and training for staff.
- Setting up mechanisms for internal coordination among hospital departments and external networking with peripheral health centres.
- Frequent and supportive monitoring and supervision.
- Development of an electronic information system for hospital engagement.

SUSTAINABILITY AND SCALABILITY

- This initiative focuses on building and strengthening sustainable linkages across the health system for TB care.
- Efforts to reach the urban poor integrated with maternal and child health initiatives in 4 cities covering 16 villages.
- Technical guidelines on TB for the urban poor developed and rolled out for use in 4 cities.
- The interventions in the WHO-CIDA initiative will be expanded to other regions in 2012-13.

INTERIM ACHIEVEMENTS

- In 2008, only 578 TB cases were reported to the NTP by 14 public hospitals in Metro Manila. By June 2012, this figure had increased many-fold with 10,145 TB cases being notified to the NTP by hospitals.
- Progress has been made in improving referral systems in engaged hospitals. In 2008, there were 1629 cases referred by 14 hospitals to peripheral health centres, but only 284 (17%) of these were registered and reported. In 2010 and 2011, referrals increased to 4316 cases and around 63% of these were registered and reported.
- From a negligible number of contacts being systematically investigated before the start of this initiative, 88% of TB cases had their contacts listed and 86% of contacts listed were screened for TB.
- A total of 589 cases from household contacts were diagnosed, which represents 2% of all contacts investigated.
- Screening has started in poor neighbourhoods with a total of 120,000 population. 142 cases have so far been detected.