Experiences in scaling up childhood TB activities - Pakistan

Farhena Amanullah

Childhood TB subgroup meeting 29th October, 2013 - Paris, France
Childhood TB in Pakistan

- TB Prevalence rate is estimated at 350/100,000 overall (child and adult cases)
- WHO 2012: Children comprise 10% of TB caseload—25733/255094
- Incidence of childhood TB: No data available. In Pakistan 34.7% of the population is <15 year age.
  - Total <15 population:
    • 34.7/100*177 million = 61.4 million
  - Incidence:
    • 25733/61400000 = 41.9 or 42 cases/100,000 population
- Provincial TB data is notified disaggregated in 0-4 and 5-14 years categories
- BCG coverage is reported as 95% in Pakistan

http://www.who.int/tb/data
Child TB case reporting from Karachi 2008-2012

34%
Pediatric TB Patients Enrolled by Quarter
Indus Hospital TB Clinic 2008-2013
Private sector engagement in Karachi
The NTP Pakistan-Childhood TB

2. Child TB included in JMM 2010

JMM Recommendations:
– Update Child TB guidelines/ train NTP and non-NTP sector
– Introduce DOTS in children’s hospitals
– Achieve high BCG coverage
Child TB activities

• Training of Trainers- Childhood TB Pakistan and Afghanistan (May 13-17, 2013)
  – Sub-regional Child TB workshop (Stop TB Partnership and NTP Pakistan)
  – 26 participants including GPs, Pediatricians, Chest Physicians, NTP workers.

• Objectives:
  – Increase case detection of TB in children
  – Improve the diagnosis and management
  – Increase implementation of child contact screening and preventive therapy
  – Improve quality of child TB data
  – Increase child TB case reporting from the private sector
Child TB training

• Training modules and course material were based on the NTP Child TB training - Cape town 2012

• Modules were adapted to Pakistan and Afghanistan's context.
Child TB training

• Review of National Child TB guidance
• An update of child TB knowledge, diagnosis and management in country context.

Participants:
  – acquired a better understanding of the importance of child TB
  – brainstormed for possible measures to improve child TB management in Pakistan
  – developed a plan for conducting training and other child TB-specific activities
Child TB training- important outcomes

• In Karachi- Following the training a large public sector children’s hospital started reporting child TB and is now the largest child TB reporting center in the city as of Q1 2013.

• Uptake of Xpert MTB/RIF for child TB diagnosis- NRL Islamabad- increasing numbers of gastric aspirates and sputum samples.
Child TB activities

• Rapid Assessment of Pediatric TB (TB Alliance/WHO) (August-September 2013)

• Objective: to understand under (or over) diagnosis and treatment in non-NTP facilities:
  – Identify points of care for child TB outside the NTP
  – Identify the presence of non-reported pediatric TB
  – Assess pediatric case records for TB

• The NTP supported and facilitated the assessment
Challenges

• Challenges identified- Rapid assessment.
  – Poor facility recording systems.
  – Lack of awareness that accurate data recording and reporting will inform/enable child TB drug procurement from NTP. Recording and reporting tools not always available.
  – PPM partnerships weak or lacking in the private/academic hospitals targeted.
Next steps in scaling up child TB activities

• Raise the profile of childhood TB in the National strategic plan to control TB.
• Identify a child TB champion who can work closely with the NTP and liaise with pediatricians, private hospitals and academia.
• Mandatory recording and reporting of child TB cases
• Steady supply of quality assured pediatric FDCs.
• Facilitate dissemination of updated National child TB guidance.
Next steps in scaling up child TB activities

• Facilitate dissemination of and training in the use of recording and reporting tools for child TB.

• Develop a clear referral system from private diagnostic centers seeing child TB suspects

• Inventory studies for child TB