WHO Civil Society Task Force on TB

TB contact investigation and/or TB screening at the household level and provision of TPT

Choub Sok Chamreun
The success of LTBI/TPT rolling out depending on the following:

• Strong and active roles of CSOs and peer support groups of people with TB to help identifying the close contacts of people with TB, screening them and supporting them to access the immediate TPT treatment

• The essence roles of education and counseling to generate demand on LTBI/TPT to be undertaken by both CSOs and peer support group of people with TB, using their experiences and join hands with the health professionals

• 3 HP and 1 HP treatment regiments need to advocate for, they are available and be rolling out for this LTBI/TPT to the eligible contacts of people with TB.
The success of LTBI/TPT rolling out depending on the following:

• CSO and peer support group of people with TB can handle and administer the supplies of TPT to the close contacts of people with TB and can help them to access to screen, test and diagnose for TB of those close contacts with TB symptom, thus, this should be articulated in the NTP Policy for TPT as part of task shifting and share the burden of health professionals
• Local people and authority should be aware of LTBI/TPT messages and benefits and join hands in promoting the LTBI and TPT in their locality
• CSOs and affected community to TB play critical roles in treatment counseling and treatment adherence for TPT – thus, this should be continued to invest to maintain the success rate of over 90% of TPT treatment.
The success of LTBI/TPT rolling out depending on the following:

• Those who newly diagnosed with bacteriological pulmonary TB, should be immediately supported and followed up for their close contacts screening to stop the spread of infections through TPT

• Ending TB, unless those diagnosed with bacteriological pulmonary TB, those with extra pulmonary TB accessed to quality and shorter TB treatment regiments and the close contacts of people with bacteriological pulmonary TB accessed to quality and shorter regimen for TPT in particular access to 3 HP and 1 HP.