

L I G H T H O U S E

Provider initiated HIV testing and counseling among TB patients and suspects

Lessons learnt from Martin Preuss Centre - Bwaila District Hospital, Lilongwe, Malawi

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Background

- High TB burden in Malawi
 - 27,000 patients register annually
- In December 2006, a TB/HIV integrated management centre was opened at Bwaila District Hospital – Martin Preuss Centre (MPC)
- Among other services, the centre offers provider initiated HIV testing and counselling (PITC) among TB patients/suspects
- PITC is internationally recommended; its impact on uptake of HIV testing services is not exhaustively described

Objective

- To describe the extent to which PITC enhanced uptake of HIV testing services among TB patients/suspects

Methods

- Retrospective cohort study using routine program data December 2006 and June 2010 at MPC
- MPC registers 300 TB patients and 345 suspects monthly
- All TB patients/suspects went for HIV testing and counseling within the TB registry following 'opt-out' strategy
- HIV test results were documented in TB registers
- Data was extracted from the TB registers for all patients and suspects
- Descriptive analysis was used to describe the programme

Results

December 2006 and October 2009

Among TB patients

- 7,455 patients were diagnosed with TB
- 6,857 (92%) had HIV status ascertained
 - 5,247 (77%) were HIV positive
 - 1,491 (22%) already knew their HIV status
- The annual ascertainment of HIV status in TB patients increased from 52% in 2007 to 94% in 2009
- Of those HIV positive, 2592 (69%) started on ART at MPC

April 2009 and June 2010

Among TB suspects

- 6,331 TB suspects were registered
- 4163 (65%) had HIV status ascertained
 - 2,246 (54 %) were HIV positive

Figure 1: TB suspect collecting sputum result



Conclusions and recommendation

- The study has demonstrated that PITC:
 - Is acceptable and feasible for TB patients and suspects
 - Leads to high ascertainment of HIV status among TB patients
- The high proportion of TB patients/suspects tested positive underscores the need to implement PITC
- Expansion of PITC to other clinical settings will contribute to effective scale up of HIV prevention, treatment and care