

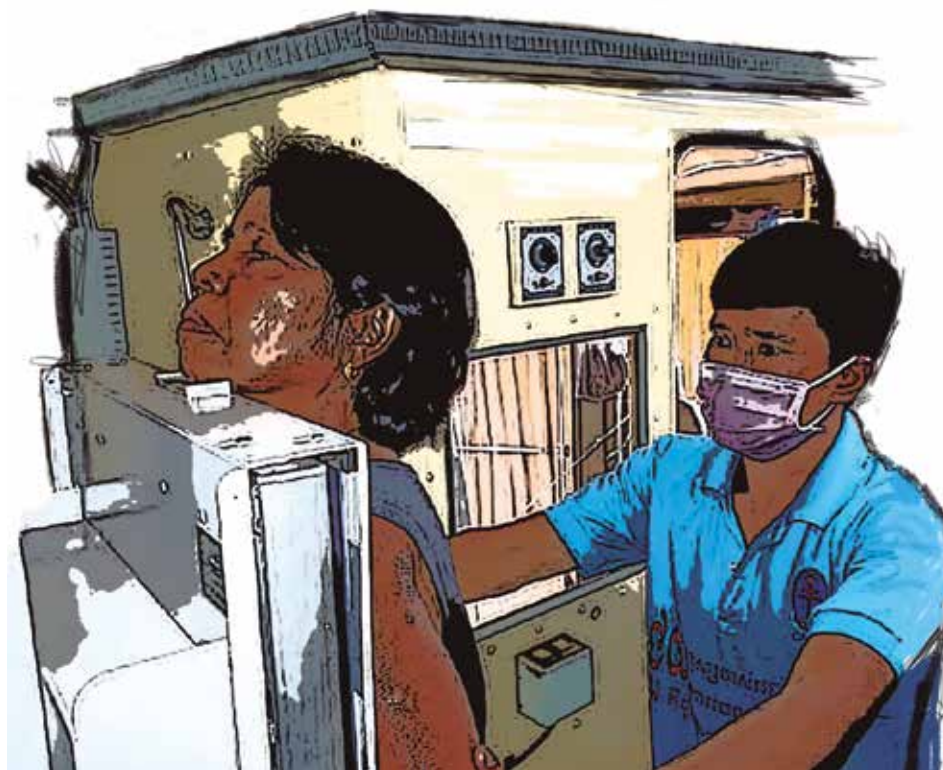


Cambodia's National Prevalence Survey in 2011 showed that the population aged 55 and above had a high smear positive tuberculosis (TB) prevalence rate of approximately 55%, although far fewer were registered for treatment. Indeed, the majority of elderly Cambodians with TB go undiagnosed. This may be due to various factors including limited knowledge of TB, the need to care for children at home, a lack of transportation to testing and care facilities, and a general reluctance to seek treatment, due in some areas to stigma and discrimination. These factors may lead elderly people to seek suboptimal treatment options, subsequently leading to a diagnostic delay.

To address these challenges, Cambodia Anti-Tuberculosis Association (CATA), with support from TB REACH, has implemented a project in which rapid diagnostic equipment has been deployed at targeted health centres to reach vulnerable elderly populations. Five Operational Districts (OD) including 91 health centres (HC) were selected for the project, and are located in four provinces: Takeo, KompongSpeu, Pursat and Battambang. A van equipped with a chest X-Ray and GeneXpert visits one health center per day to screen for TB. This approach is expected to provide the targeted elderly communities with better access to TB services and to reduce the associated poor diagnostic outlook.

Cambodia

Cambodia Anti-Tuberculosis Association (CATA)



The intervention is being collaboratively carried out with stakeholders including HC, OD, and village health support groups (VHSG), with support from the National TB Control Program (NTP), Provincial Health Department (PHD) and local authorities. One week before implementation began, the VHSG and HC staff was trained in identifying TB suspects and the process of active case finding. The VHSG of each village contacts those with suspected TB and refers them to the HC for a specified date. The project pays for transportation of those who can't afford the associated costs, and another mobile lab team travels to the areas not visited by the chest x-ray van. This team collects sputum from individuals with suspected TB. After Xpert testing is provided, these individuals are referred for chest x-ray if it is indicated.

From August 2013 to February 2014, the project teams reached the 91 health centres and 11,647 people with TB suspected were screened by chest x-ray. The project diagnosed 1,064 TB notified cases, constituting 2.6% of 40,000 total case notifications in the country. Among them 10 were Rifampicin resistant, constituting 9% of 110 cases of MDR detected that year in the country.

Active case finding using mobile diagnostic teams provided easy access to the elderly and other hard-to-reach groups. This activity contributed significantly to the national case notifications for both drug susceptible TB and MDR-TB cases, and hopes to use lessons learned to benefit future case finding activities in the country.