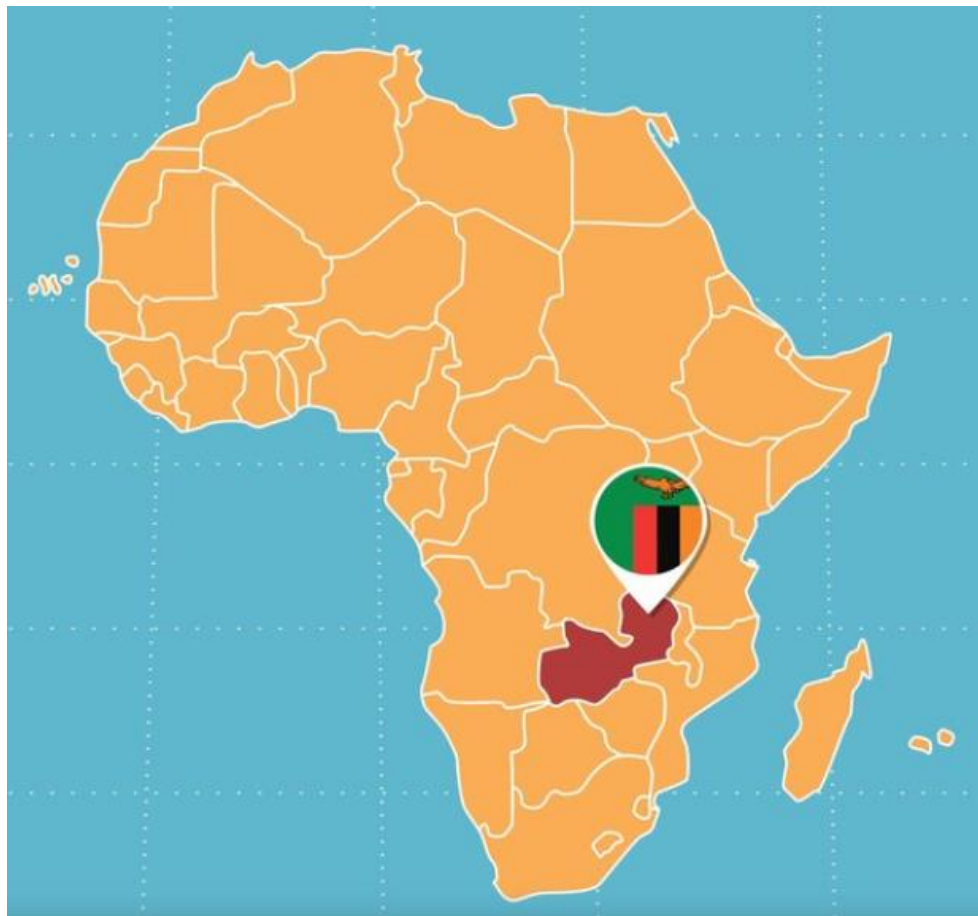


# Experience from Zambia with implementing the 4-month regimen for non-severe TB in children and adolescents

*Cheelo Mwiinga*  
*National TB/Leprosy Program- Zambia*



# Country profile



- Population: 19,610,769
- Capital city: Lusaka
- 10 Provinces and 116 districts
- TB incidence: 283/100,000 pop
- TB mortality rate: 24/100,000 pop
- Est. MDR-TB incidence: 8.1/100,000 pop
- National adult HIV prevalence: 11%
- DS-TB Treatment Success rate: 93%
- MDR-TB treatment success rate: 80%

# Background

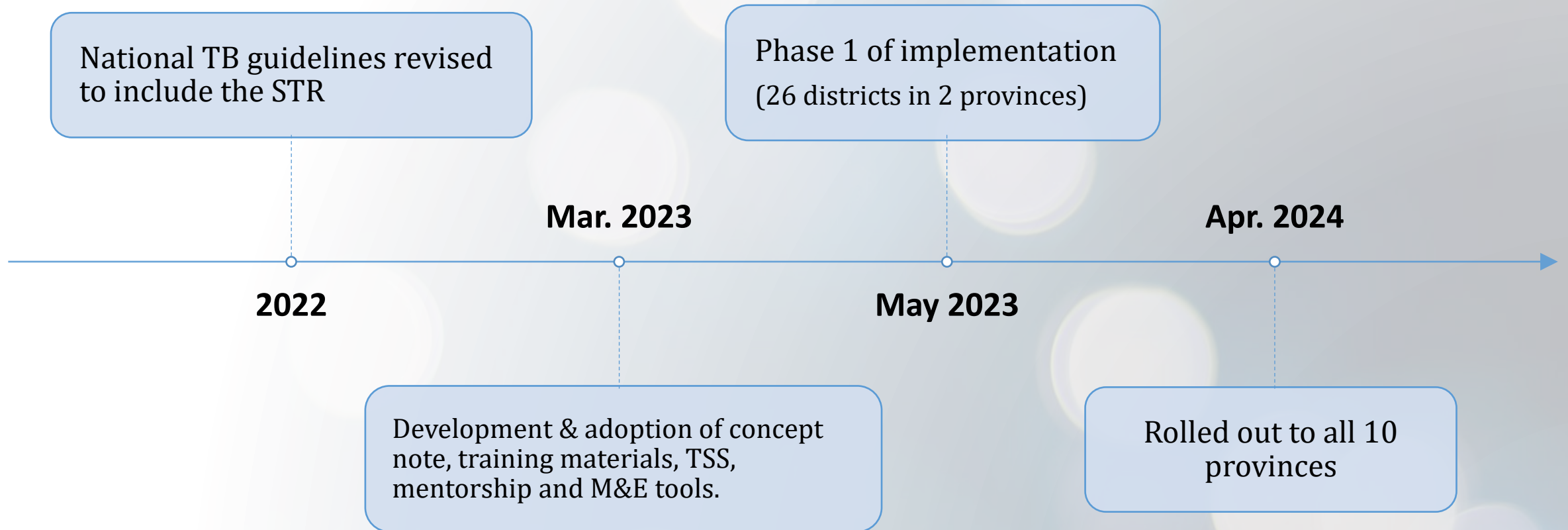
- Zambia is among the 30 countries with high TB and TB-HIV burden globally.
- TB is one of the top 10 causes of morbidity and mortality among children in the country.
- Total DS-TB case notifications in 2023 – **55,182**
  - **11%** children 0-14 years

# Trends in childhood TB cases in Zambia

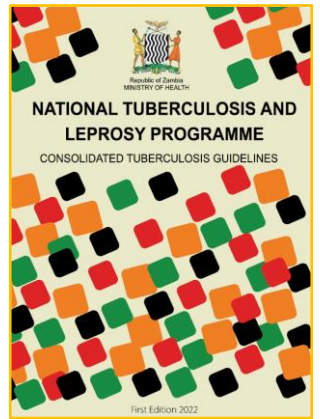
- Increased contributions of childhood TB notifications from 7 % in 2021 to 11% in 2023
- Proportion of bacteriologically confirmed cases increased from 17% in 2019 to 63% in 2023



# STR Implementation timeline



# Adapted guidelines in Zambia



Parameter	Eligibility criteria
Age groups	3mo - 14 years*
Severity assessment	WHO definition**
Exclusions	<ul style="list-style-type: none"> <li>• Bacteriologically confirmed TB above low on Xpert/Xpert Ultra or by smear</li> <li>• Advanced HIV disease</li> <li>• Severe acute malnutrition</li> <li>• Children and Adolescents treated for TB in past 2 yrs</li> <li>• Severe symptoms requiring hospitalisation</li> <li>• All forms of severe TB</li> </ul>
Diagnostic approach	As per WHO guidelines on approach based on availability of radiology or laboratory support
TB regimen	<b>2RHZE /2RH</b>
Implementation approach	Phased in selected regions

\*WHO recommends 16years

\*\*WHO Module-5 2022\*=peripheral LN TB, intrathoracic LN TB without airway obstruction, uncomplicated TB pleural effusion; non-cavitary disease confined to 1 lobe and without a miliary pattern

# Pre- implementation activities



- STR Training materials developed
- TOT conducted in all provinces
- Trained facility staff in STR



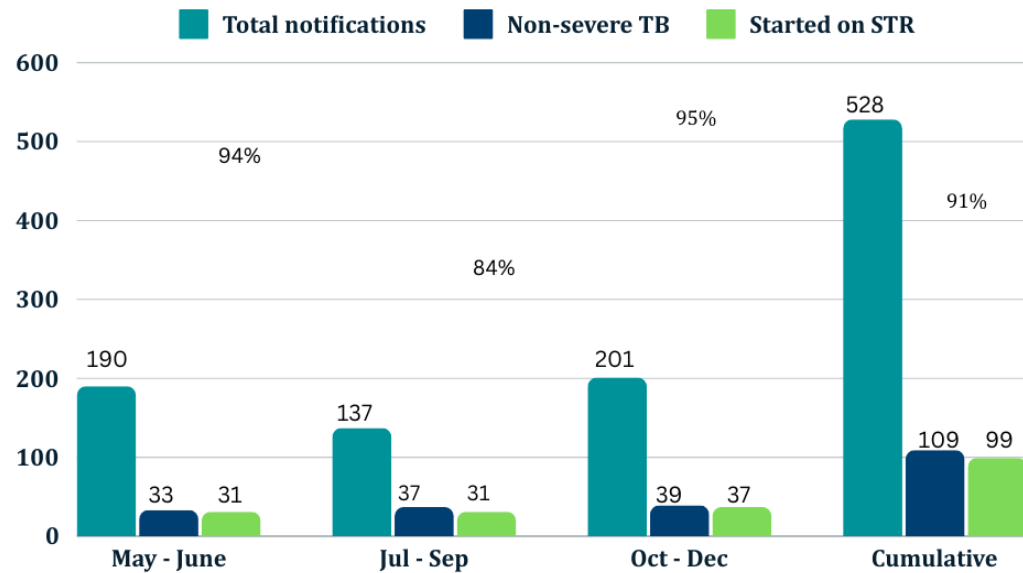
Onsite orientation



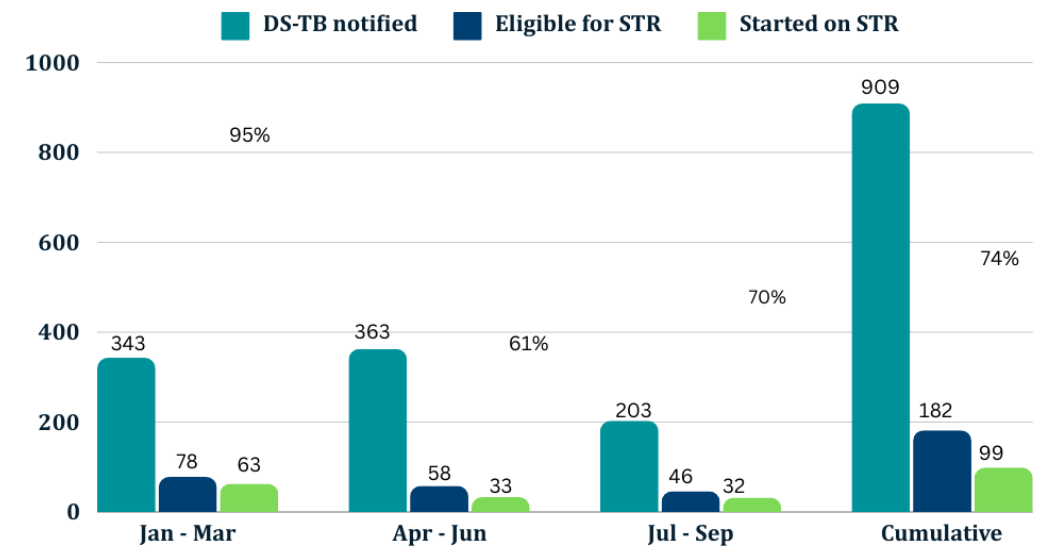
Radiology training on  
diagnosis of TB

# Performance in the pilot sites

2023

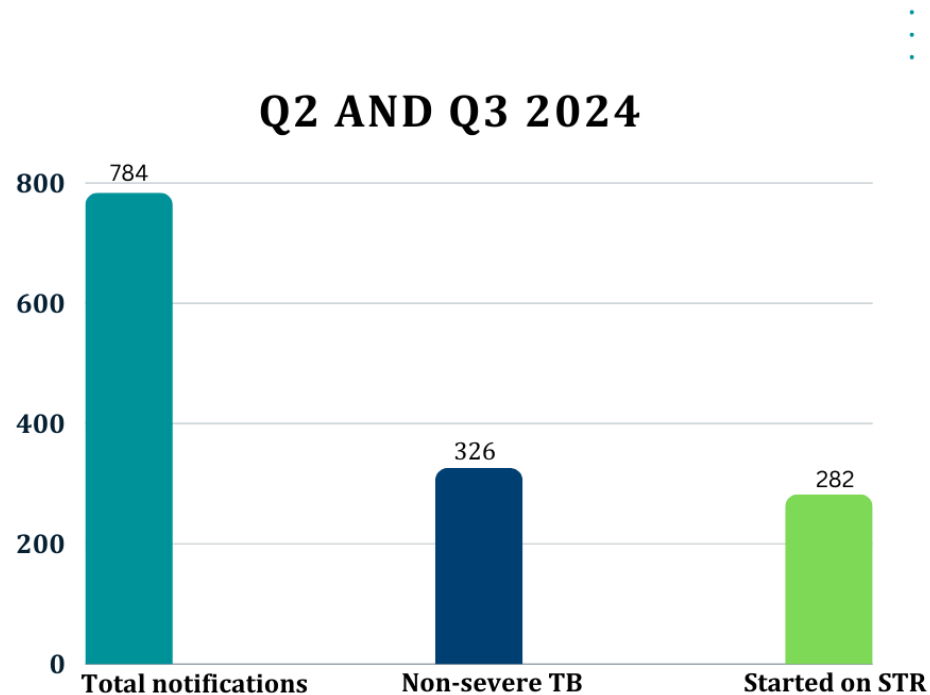


2024





# Cumulative results in all provinces



- 87 % of children with non-severe TB between the ages of 3 months and 14 years were commenced on STR in Q2 and Q3 of 2024

# Challenges



Some facilities have no clinicians dedicated to chest clinics, affects decisions for STR use



Under-reporting of children initiated on STR



Limited community awareness of STR



Radiology not always readily available and there are some gaps in CXR interpretation

# Successes



Training and Capacity Building  
(Decentralised, >1000 HCW trained)



Successful integration into National  
Guidelines.



Successful development of pediatric  
TB clinical review forms



Data Collection and Monitoring

# Lessons learnt



Training and Capacity building



Training of Mentors within the provinces



Incorporation of STR in policy documents led to easier acceptability by different stakeholders



Tertiary Hospitals enroll very few patients on STR

# Recommendations

1

Prioritize community awareness during implementation .

2

Continuous onsite training

3

Early integration of STR in Electronic Medical records and other existing records.

# Acknowledgements

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- CIDRZ- TBLON
- Supporting partners at different levels of program implementation.

**THANK YOU**