TB/HIV Group
Definition of TB suspects in those known to be HIV positive

- Adults and adolescents: a TB suspect is defined as anyone who reports any one of current cough, fever, weight loss, or night sweats.

- Children: a TB suspect is defined as anyone who reports one of poor weight gain, fever, current cough, or history of contact with a TB case, and is clinically assessed as high risk of TB.
Definition of TB suspects in those with unknown HIV status

- In adults, adolescents, children (>18 months), and infants with unknown HIV status, HIV testing should be performed according to national guidelines or nationally validated testing algorithms.

- In patients who are HIV negative or remain HIV unknown (e.g., refusal), a TB suspect is defined according to national case definitions.
TB suspects known to be HIV positive

Xpert

- Xpert MTB+/RIF-
  - Enrol on relevant TB regimen
  - CPT
  - ART

- Xpert MTB+/RIF+
  - Enrol on MDR-TB regimen
  - DST/SLD
  - CPT
  - ART

- Xpert MTB-/RIF-
  - Ambulatory patient with no danger signs
  - Follow modified 2007 algorithms

Seriously ill patients: follow specific algorithm
Ambulatory patient

Xpert MTB-/RIF-

Xpert MTB-/RIF- and ambulatory HIV positive patient with no danger signs

PTB unlikely

Clinical assessment for EPTB or other etiologies
CXR

EPTB likely

Refer to 2007 algorithms for Rx and management

EPTB unlikely

Treat for bacterial infection
HIV assessment
CPT

Response

No or partial response

Response

Reassess for TB
Repeat Xpert

Treat for PCP
HIV assessment
Seriously ill PLHIV

Seriously ill patient with cough 2–3 weeks and danger signs

- Referral to higher level facility
  - Parenteral AB Rx for bacterial infection
    - Xpert
    - CXR
  - No tuberculosis
  - Treat tuberculosis

- Immediate referral not possible
  - Parenteral AB Rx for bacterial infection, consider Rx for PCP
    - Xpert, CXR
  - Xpert positive
    - Improvement after 3–5 days
  - Xpert negative
    - No improvement after 3–5 days
    - Start TB treatment
    - Complete antibiotics
    - Refer for HIV and tuberculosis care

Reassess for other HIV-related disease

TB unlikely

Reassess for tuberculosis
Where does the algorithm apply?

- If Xpert is available on site, then Xpert should be performed.

- If Xpert is not available on site, the 2007 guidelines should be performed.