

*Skills Building Workshop for Managers of National HIV and TB Programmes  
Washington DC, 24 July 2012.*

# HIV/TB Collaborative Activities: Implement, Integrate and Scale Up to Prevent TB Deaths in PLHIV.

Haileyesus Getahun  
Stop TB Department, WHO  
Geneva, Switzerland

# The 2012 WHO Policy: March 2012

## WHO policy on collaborative TB/HIV activities

Guidelines for national programmes and other stakeholders



## WHO-recommended collaborative TB/HIV activities

### A. Establish and strengthen the mechanisms for delivering integrated TB and HIV services

- A.1. Set up and strengthen a coordinating body for collaborative TB/HIV activities functional at all levels
- A.2. Determine HIV prevalence among TB patients and TB prevalence among people living with HIV
- A.3. Carry out joint TB/HIV planning to integrate the delivery of TB and HIV services
- A.4. Monitor and evaluate collaborative TB/HIV activities

### B. Reduce the burden of TB in people living with HIV and initiate early antiretroviral therapy (the *Three I's for HIV/TB*)

- B.1. Intensify TB case-finding and ensure high quality antituberculosis treatment
- B.2. Initiate TB prevention with Isoniazid preventive therapy and early antiretroviral therapy
- B.3. Ensure control of TB infection in health-care facilities and congregate settings

### C. Reduce the burden of HIV in patients with presumptive and diagnosed TB

- C.1. Provide HIV testing and counselling to patients with presumptive and diagnosed TB
- C.2. Provide HIV prevention interventions for patients with presumptive and diagnosed TB
- C.3. Provide co-trimoxazole preventive therapy for TB patients living with HIV
- C.4. Ensure HIV prevention interventions, treatment and care for TB patients living with HIV
- C.5. Provide antiretroviral therapy for TB patients living with HIV

# The 12 points policy package: **What's new?**

## **A. Establish the mechanisms for integrated TB & HIV services**

1. Set up **or strengthen** a TB/HIV coordinating body effective at all levels
2. Conduct HIV **and TB** surveillance **among TB and HIV patients respectively**
3. Carry out joint TB/HIV planning
4. Conduct monitoring and evaluation

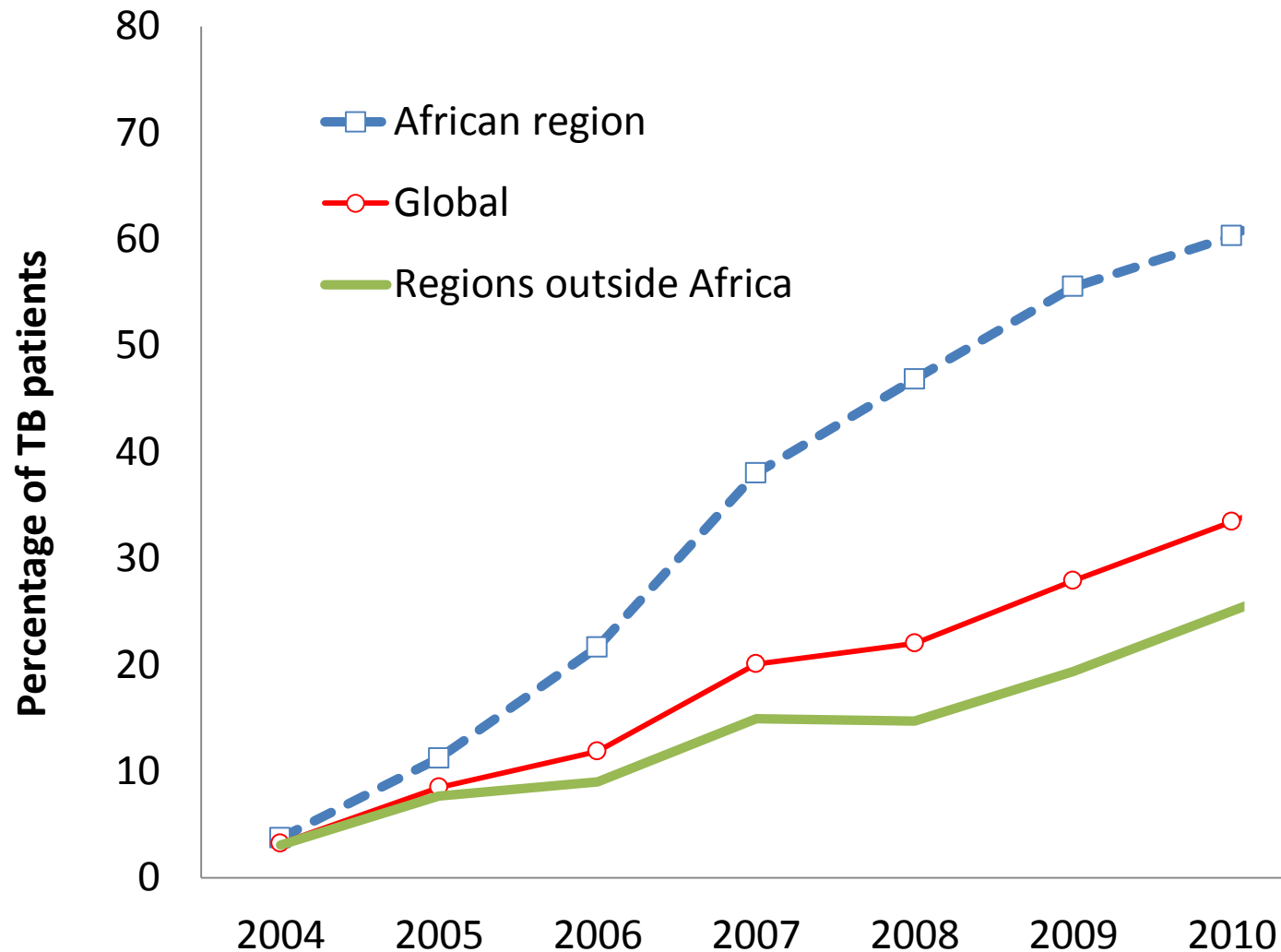
## **B. Decrease the burden of TB in PLHIV (*Three Is for HIV/TB and earlier initiation of ART*)**

5. Intensify TB case finding **and ensure quality TB treatment**
6. Introduce TB prevention with **IPT and ART**
7. Infection control for TB in health care and congregate settings ensured

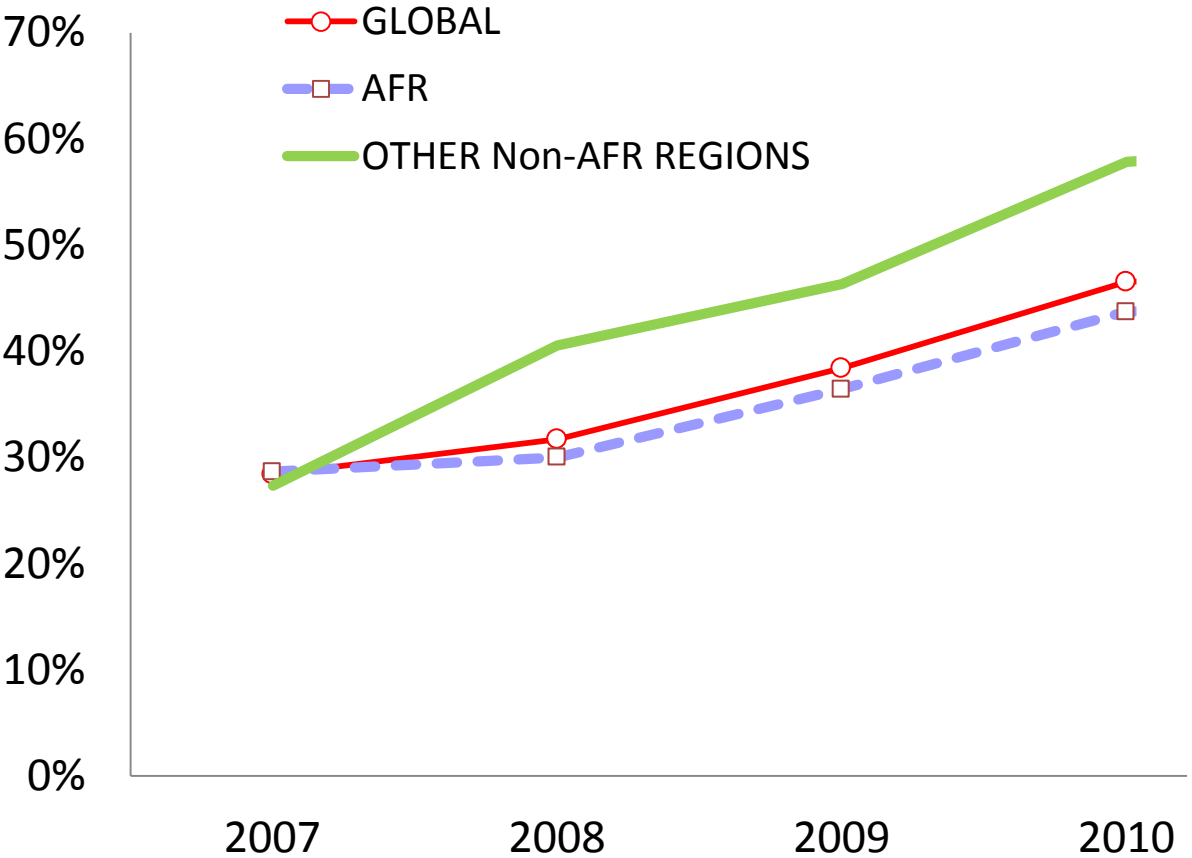
## **C. Decrease the burden of HIV in patients with **presumptive** and diagnosed TB**

8. Provide HIV testing & counselling to patients with **presumptive** and diagnosed TB
9. Introduce HIV preventive methods patients with **presumptive** and diagnosed TB
10. Provide CPT for TB patients living with HIV
11. Ensure **HIV prevention, treatment & care for TB patients living with HIV**
12. Provide Antiretroviral therapy to TB patients living with HIV

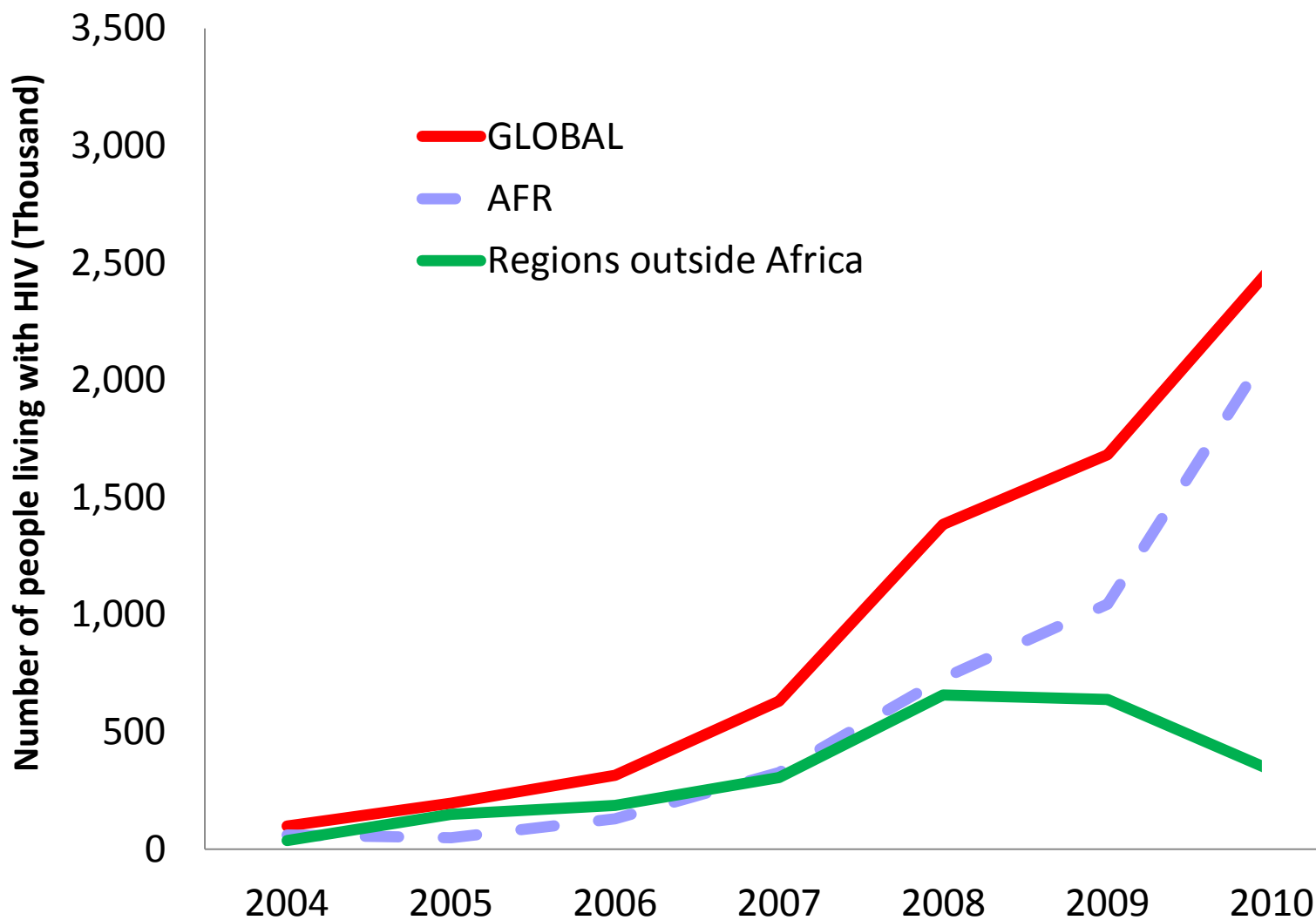
# HIV testing for TB patients: Africa vs. other regions



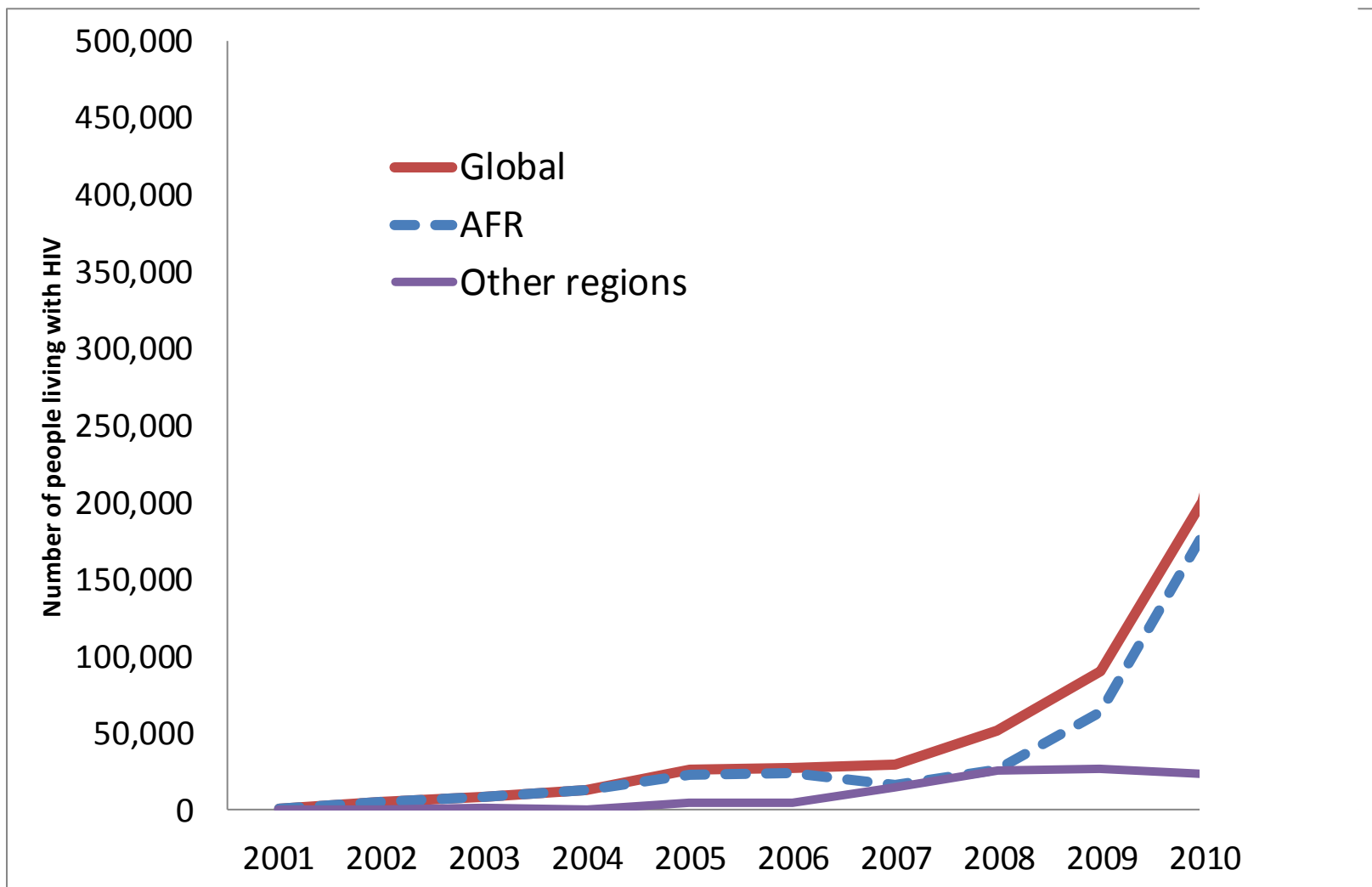
# Percent of TB patients receiving ART: Africa vs. other regions



# PLHIV screened for TB: Africa vs. other regions



# PLHIV receiving IPT: Africa vs. other regions



# Percent of reduction of TB risk with ART by CD4 count

	CD4 <200	CD4: 200-350	CD4>350
Studies (n)	2	4	3
Protection (%)	84	66	57

*Suthar et al, 2012*

**ART reduces TB risk at all CD4 levels**



# Percent of reduction of TB risk with IPT, ART, and combined ART and IPT

Studies	IPT alone	ART alone	ART plus IPT
Brazil	68	52	80
South Africa	13	64	89
Botswana	65	67	97

AIDS 2007: 21: 1441-8;  
AIDS 2009, 23:631–636;  
Lancet 2011: 377:1588-98

**ART has significant impact when combined with IPT**

# Objectives of the workshop

---

- What are the enablers for nationwide scale up of collaborative TB/HIV activities?
- What are the key challenges for scaling up collaborative TB/HIV activities and how can they be overcome?
- What are the key lessons that can be shared among different countries and regions?