AIDS 2014 Workshop on increasing access to TB services as part of integrated care for people who inject drugs

Integrating TB services into harm reduction services in the Eastern European context

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Cooperation in the field of HIV/TB at the national level

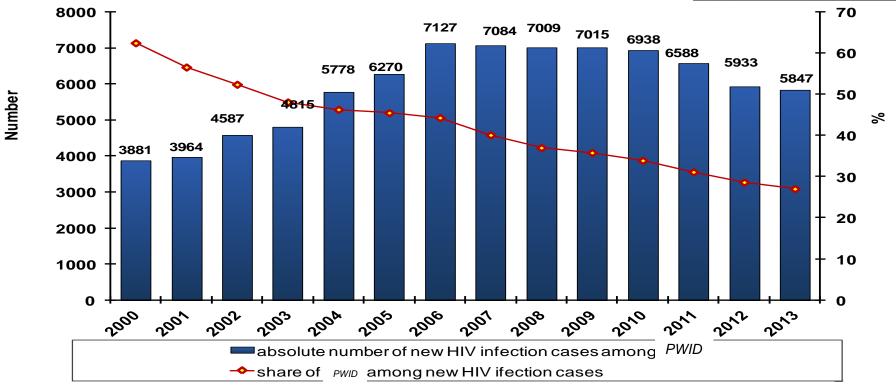
- Existence of a Coordinating Council at the national level for the implementation of joint actions in the field of HIV/TB.
- Regional authorities for the implementation of joint activities in the field of HIV/TB.
- Surveillance, monitoring and evaluation.
- Implementation of HIV/TB/PWID integrated services` system.
 - TB preventive treatment in HIV-infected patients.
 - Introduction of VCT for all TB patients.
 - Early start of ART and DOT for the patients with HIV/TB/PWID.





Dynamics of officially registered new cases of HIV-infection among PWID in Ukraine





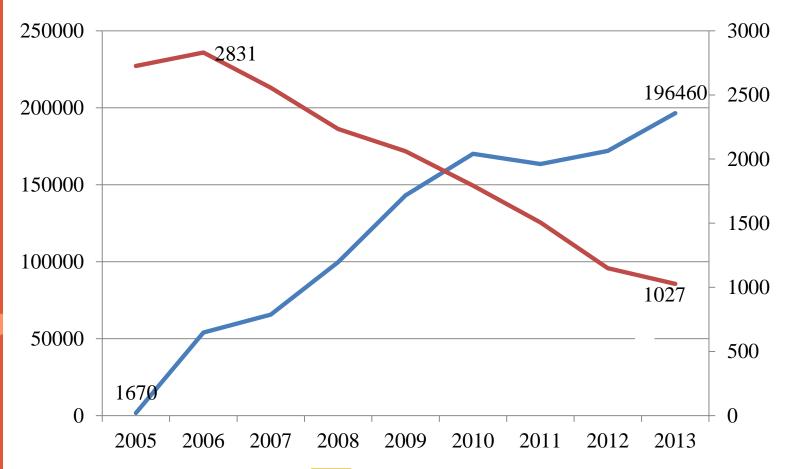
For the period 1999-2006

The absolute number of PWID among new HIV infections increased annually

For the period 2007-2013

The number of PWID has decreased among the new cases of HIV infection, including HIV-infected persons 15-24 years

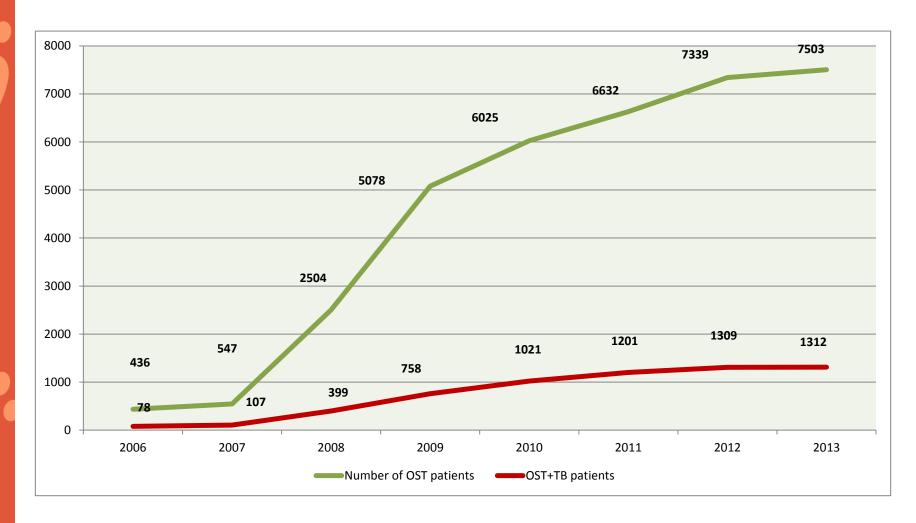
Number of HIV cases registered among PWID <25 (red line) and number of PWID reached by programs (blue line), 2005-2013 (official registration)







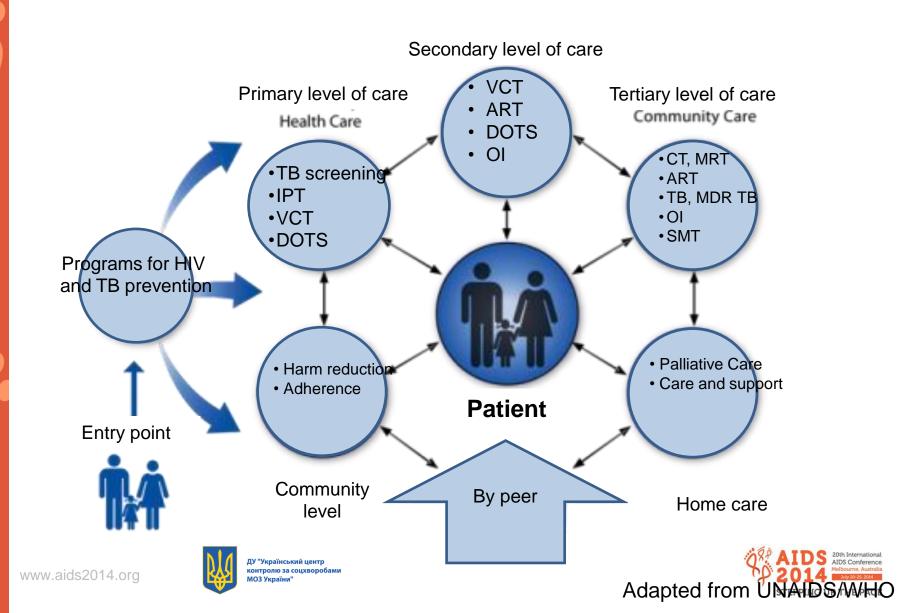
TB prevalence among OST patients in Ukraine (2006-2013)







Patient-centered care model



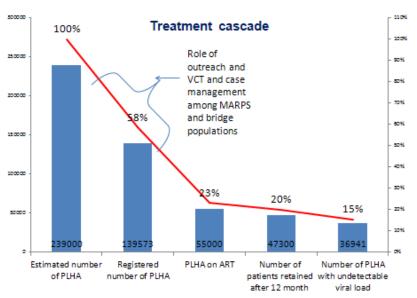
ART among PWID

- In Ukraine 53 163 persons receive ART
- Among them active PWID
- -5994
- With AIDS diagnosis under medical supervision 15 287 persons, infected through injection
- Among them on ART

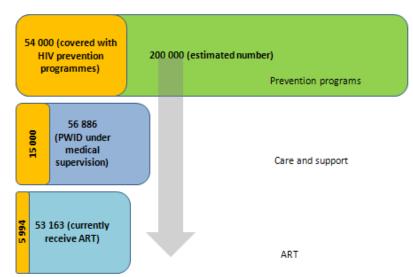
 5994

 persons





HIV positive PWID and current access to services (01.01.2014)



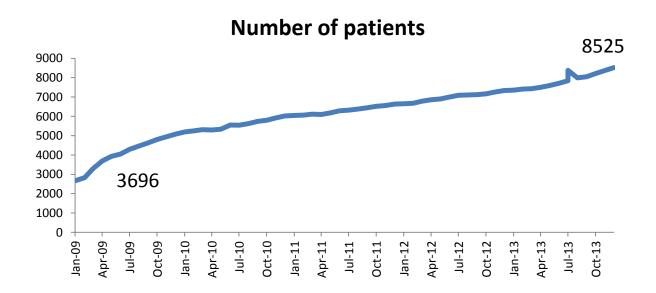
Development of OST program from 2008 to 2014

- 8 219 patients receive SMT services, among them 3 424 (41%) with HIV, 1 554 (18,9%) with HBV, 4 251 (51,7%) with HBC, 1 328 (16%) with TB;
- 1 774 receive ART (52% from HIV patients)

200 150 100 106 106 107 108 109 2008 2009 2010 2011 2012 2013

Number of SMT sites

• retention in the program— 70 % patients were receiving SMT continuously during 6 months. (cohort of 1 half of 2013 in 2 half 2013).





Results of the study "Adherence to TB treatment among injecting drug users in Ukraine"

- Interruption in TB treatment were not recorded among OST patients, while in the control group this indicator made 20,7%
- Average percent of medical prescription completion regarding drug-taking among OST patients is 97.1% versus 86.2% in the control group
- Prevalence of HIV, TB and MR TB is higher among patients who are not received OST
- Among OST patients there are more employed persons, and most had children.

Ukrainian Research Institute of Public Health

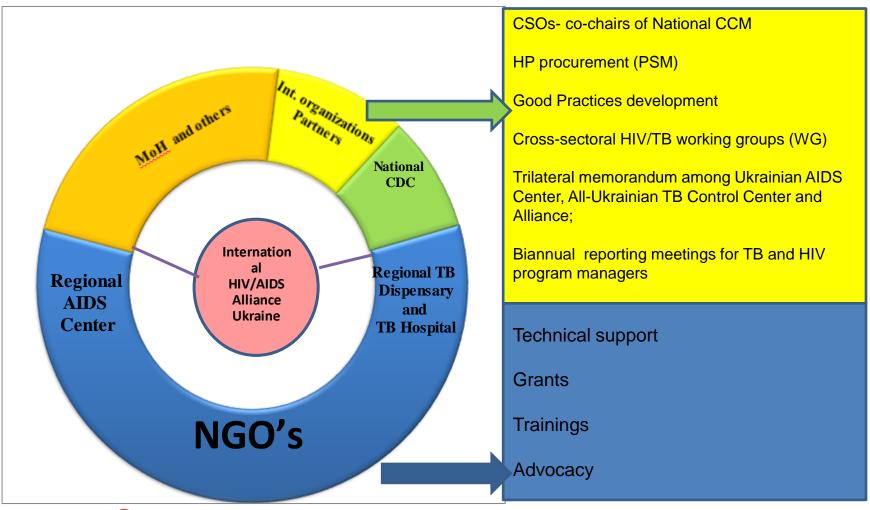




CSO Collaborations



Alliance Ukraine in TB/HIV Collaboration







Decrease the burden of HIV in TB patients





- Providing grants to NGOs to expand their activities on HIV prevention among vulnerable groups in TB institutions
- Counseling on HIV/AIDS prevention and safe behavior;
- Distribution of condoms, syringes and spirit wipes (for IDUs)
- Dissemination of informational materials;





Active TB detection in MARPs



- Training for NGO's staff on TB risk, infection control and general education
- TB screening using questionnaire
- Sputum collection
- Support in accessing health care
- Outreach







Integrated services

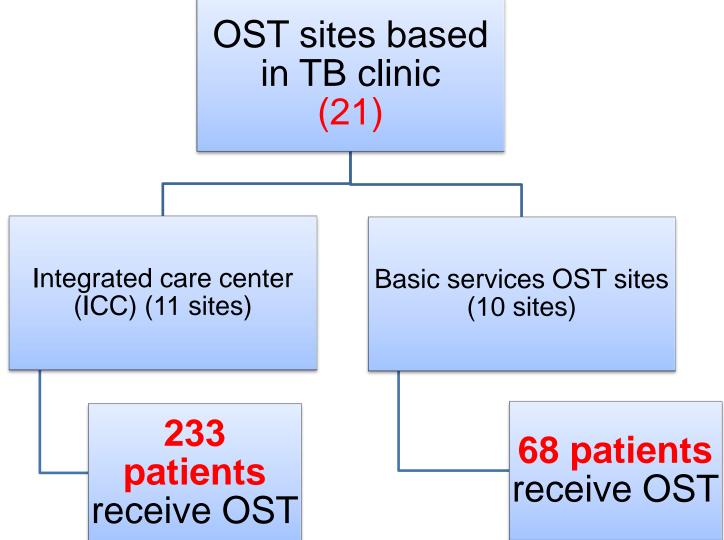
- Provision of multidisciplinary model of support for patients with double (drug abuse + HIV infection) or triple (drug abuse + HIV infection + TB) disease burden
- Services are provided on the territory of one institution integrated care center "one-stop-shop"

As of 01.06.2014 there are 8219 OST patients

Out of them
1328 (16,2%)
have confirmed TB
diagnosis



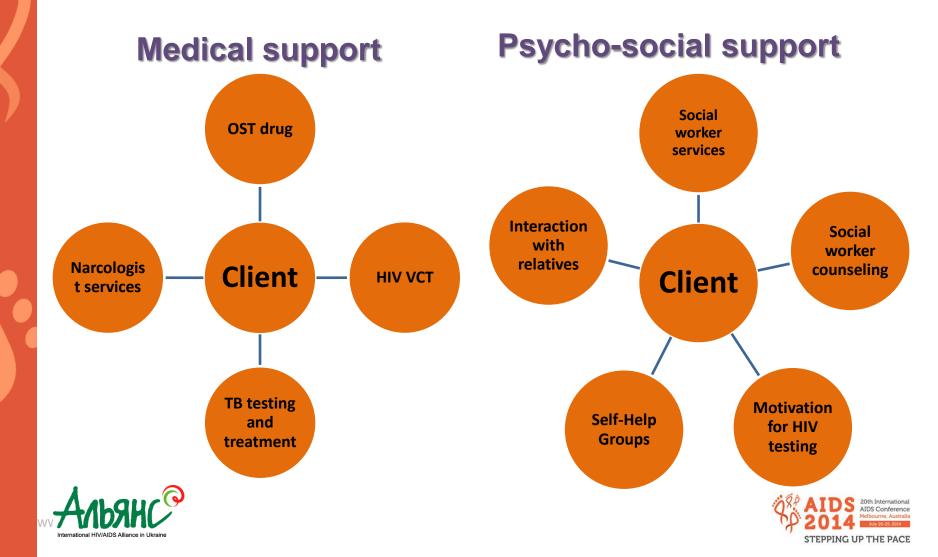








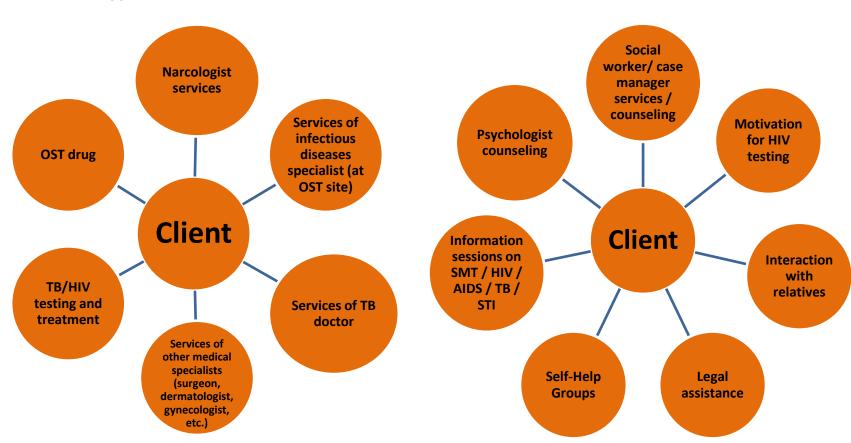
Services provided to the OST client (Basic services OST site)



Services provided to the OST client (ICC sites)

Psycho-social support

Medical support







Results and lessons learnt

- By the end of 2013, 36 implementing partners
- provided TB screening to 10 218 clients
- •referred 5707 clients to phthisiatrician and further medical examination
- •detected 659 TB cases, including 542 (9,5%) patients newly diagnosed and relapses
- 88 OST sites were organized to provide medical and psychosocial services
- OST as part of integrated services for PWID, contributes to form adherence to antiretroviral drugs as well as to the treatment of MDR-TB.







Key challenges

- ✓ Lack of recourses at NGOs to initiate integration within health care system without institutional support
- ✓ No regulation to guide partnerships between NGOs and (TB) HCF
- ✓ Lack of technical capacity (technical knowledge about disease and treatment)
- ✓ Stigma and discrimination











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Conclusions

- OST should be considered as a priority component of the HIV/ AIDS and TB prevention program.
- -CSO's participation in TB and TB/HIV activities is crucial to successful implementation of National HIV/TB programs
- Patient-oriented integrated approach is needed for TB/HIV implementation (DOTs, Stop TB strategy)
- CSO's staff should be trained on TB related technical capacity to further engage in national TB programs for MARP's
- -With the leadership from the Government a functional coordination mechanism between all these services must be in place







Thank you!

Dyakyo!





