Pilot Project

Model Development of Mandatory TB Case Notification in Myanmar

1st May, 2018
* TB epidemiology and onion model
* Situation of Non-PPM partners to be applied in Mandatory TB Case Notification
* Missing TB cases by Regions and States and by providers’ aspect & risk groups
* Definition of Mandatory TB Case Notification
* Action plans for pilot project
TB Epidemiology, Myanmar (2015)

TB incidence

TB Mortality

Data source: Global TB Report (2016)
NTP needs to strengthen case notification measures in layer 2 and 3 of ‘onion’ model
### Situation of private sectors (2014)

<table>
<thead>
<tr>
<th>SN</th>
<th>Types of private health sector</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>private general clinics</td>
<td>18443</td>
</tr>
<tr>
<td>2</td>
<td>private dental clinics</td>
<td>3219</td>
</tr>
<tr>
<td>3</td>
<td>private specialist clinics</td>
<td>201</td>
</tr>
<tr>
<td>4</td>
<td>private hospitals</td>
<td>193</td>
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</table>

#### Types of private health sector engaged

<table>
<thead>
<tr>
<th>SN</th>
<th>Types of private health sector</th>
<th>Number (2016)</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>MM</td>
<td>PSI</td>
</tr>
<tr>
<td>1</td>
<td>private clinics</td>
<td>1456</td>
<td>955</td>
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<tr>
<td>2</td>
<td>private hospitals</td>
<td>9</td>
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</table>

Source: Annual Evaluation meeting (2016)

Not engaged Private clinics 16000

Not engaged Private Hospitals 180

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Source: Health Care in Myanmar (2014) by Nyi Nyi Latt and et al.
NTP should engage Private hospitals

To set up proper linkage, referral and feedback

To develop uniform recording, reporting and notification

Private hospitals

TB partners

NTP

Managing TB under standardized guideline

To provide regular training

- Updated TB management
- About infection control

Source: Study on “Public-Private Mix (PPM) Tuberculosis (TB) control activities in (22) private hospitals among (153) Physicians in Myanmar: Providers' perspective” (2016)
Globally, 4 millions cases are missed in whether urban or rural

In Myanmar, about 50,000 missing cases

Communicable disease Law is now reviewed underway through MOHS & Parliament

MOHS has already approved on piloting mandatory TB case notification

Policy statement will soon be come out for mandatory TB reporting
## Missing TB Cases by Regions and States

<table>
<thead>
<tr>
<th>Region</th>
<th>Missing TB Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yangon</td>
<td>5784</td>
</tr>
<tr>
<td>Ayeyarwaddy</td>
<td>4840</td>
</tr>
<tr>
<td>Kachin</td>
<td>4838</td>
</tr>
<tr>
<td>Sagaing</td>
<td>4836</td>
</tr>
<tr>
<td>Shan (Lashio)</td>
<td>4644</td>
</tr>
<tr>
<td>Rakhine</td>
<td>4145</td>
</tr>
<tr>
<td>Bago</td>
<td>3678</td>
</tr>
<tr>
<td>Mon</td>
<td>3578</td>
</tr>
<tr>
<td>Mandalay</td>
<td>2889</td>
</tr>
<tr>
<td>Kayin</td>
<td>2751</td>
</tr>
<tr>
<td>Magway</td>
<td>2450</td>
</tr>
<tr>
<td>Tanintharyi</td>
<td>1620</td>
</tr>
<tr>
<td>Shan (kengtong)</td>
<td>1136</td>
</tr>
<tr>
<td>Shan (Taunggyi)</td>
<td>1043</td>
</tr>
<tr>
<td>Naypyitaw</td>
<td>685</td>
</tr>
<tr>
<td>Chin</td>
<td>608</td>
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<tr>
<td>Kayah</td>
<td>274</td>
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</table>

Total: 49798
Military hospitals - case holding is very large
Migrant population is important risk group residing across the country
Missing cases at hard to reach areas

Non-PPM practitioners - no known information of situation
Non-PPM partners - really challenging, particular in Yangon region where MDR-TB management is more difficult, compared to DS-TB
Mandatory Tuberculosis (TB) Case notification is defined as the process to Notify diagnosed and treated TB cases by all health care providers to township public health department, On weekly basis as per Myanmar Legislative framework.
* Proper planning and preparation for pilot project such as advocacy tools, IEC materials, training package etc.
* Development of SOP & Operational framework
* Selection of 4 sites decided in Yangon (Insein and North Okkalapa), Sagaing (Monywa) and Kachin (Myitkyina) for Non-PPM GPs and private hospitals, approved by MOHS
Action plan

- Advocate private hospitals and GPs through MMA
- **Need specific ToR** for TB Coordinator + PHS II as field staff in Township health department to involve in mandatory reporting, linking with private sectors
- Partner organizations could **offer staffs** for pilot activity
- Develop operational plan with **close monitoring** in 3-6 months cycle
- **Weekly reporting from private sectors** will be done in pilot activity
Mandatory TB Case Notification Network

Township Health Center

Private Hospital

Non-PPM-GP

Private laboratories

PPM Hospital (Govt)

MSF(H)

TB partner (MAM)

TB Specialist

Orthopaedic surgeon

Paediatrician

Physicians

Mandatory TB Case Notification Network

MMA-GP

PSI-GP

TB Specialist

Orthopaedic surgeon

Paediatrician

Physicians

Mandatory TB Case Notification Network

MMA-GP

PSI-GP

TB partner (MAM)

MSF(H)

PPM Hospital (Govt)
Mandatory TB Case Notification Form

Part A: Provider’s Profile

Provider’s Registration number: ___________________________ Date of Notification_____________________

Clinic Registration number: ___________________________

Part B: Client’s Profile

<table>
<thead>
<tr>
<th>Name</th>
<th>Date of Birth (dd/mm/yy)</th>
<th>Age (Years)</th>
<th>Sex</th>
<th>Telephone No.</th>
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<tbody>
<tr>
<td></td>
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<td>1.</td>
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<td>2.</td>
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<td></td>
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<td></td>
<td></td>
<td>3.</td>
</tr>
</tbody>
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Father’s name: ___________________________  Address: Room No/House No., Street……………………………………., Ward………………………………………, township

- Diabetes Mellitus: [ ] positive [ ] negative [ ] Not done [ ] Not known
- HIV Status: [ ] reactive [ ] nonreactive [ ] Not done [ ] Not known
- Sputum AFB result: [ ] positive [ ] negative [ ] Not done
- Gene X pert result: [ ] positive [ ] negative [ ] Not done [ ] Rifampicin Resistance
- Chest X ray result: [ ] normal [ ] abnormal [ ] Not done

Other investigations (specify): (1)__________________ (2)__________________ (3)__________________ (4)__________________

- Type of TB: [ ] Pulmonary [ ] Extra pulmonary [ ] Both
- Category of patients: [ ] New [ ] Old/Previously treated [ ] Other
- Treatment Regimen: [ ] Initial [ ] Retreatment [ ] Childhood [ ] Other regimen
- Treatment outcome: [ ] Cured/completed [ ] Failure [ ] died [ ] Loss to FU
  - Transferred out/not evaluated [ ] Moved to SLD

Patient’s registration number (at Township) (optional): ___________________________

Notified Clinician’s Signature: ___________________________ Township TB Coordinator’s Signature: ___________________________

Name: ___________________________ Name: ___________________________
Sama Registration number: ___________________________ Designation: ___________________________
Clinic’s name: ___________________________ Township: ___________________________
Date: ___________________________ Date: ___________________________
Pilot Tools suggestion

- **Mobile application** in pilot stage should receive higher consultations to start & also takes time
- need to be user-friendly in very simplified way
- **Suggest to start with paper-based hard copy document**
THANK YOU