National TB prevalence surveys

1. Xpert® MTB/RIF (or Xpert Ultra) and culture
2. Updates to Lime book
3. Provision of TA to countries
4. Good Clinical Practice - concept note
Xpert® MTB/RIF (or Xpert Ultra) and culture

- Given challenges with culture
  - Lower yield of culture vs Xpert
  - Cost
  - Workload
- Future surveys to consider use of Xpert as main diagnostic test, and culture is not-a-must:
  - 2 Xpers per sputum eligible participants
- If culture is done, it should be quality assured
- Consideration for use of culture for some subgroups:
  - Xpert-positive
  - Past history of TB
  - Subset of clusters
- Clinical follow-up to take a larger role in defining prevalent cases
- Use survey diagnostic methods to allow for the comparison of methods used in routine programme, and for repeat surveys.
- To explore clinically diagnosed prevalent TB
- Xpert MTB/RIF can be synonymous with molecular tests in general.
TB prevalence survey handbook (lime book)

• Agreement – that there is need for an update
• Final format TBD
  • Meeting notes → formal guidelines
• To be completed within a year!
• Major (and priority) topics to be updated
  • Laboratory algorithms
  • Prevalent case definition
  • Data management (work in progress)
  • Why we are doing surveys?
  • Small area estimation
Other topics

• Global Fund
  • Alignment of GF funding cycle with survey (2020)
  • Is there a prioritization of countries to do a survey/repeat survey?
  • Too much pressure to spend money – negative impact e.g. Namibia.

• Minimum standards before and during a survey

• Minimum package of TA

• Independent monitoring of surveys

• Expand TA providers inline with number of surveys planned

• Surveys to adhere to Good Clinical Practice/Epi principles:
  • take one year to develop
  • Collaborations? TDR, KIT etc
Area of disagreement

Salmon pink

LJ green

Eggshell white

Mango orange

Auramine

Blue majorelle