

38th Union World Conference on Lung Health, 8 to 12 November 2007

**“Lessons learnt: community
participation in provision of TB
services and in operational research
on TB-HIV
Sunday, 11 November 2007**

**The experience of the “THRio” project
(CREATE Consortium) in implementing
a TB-HIV operational research project
by municipal health care services
providers in collaboration with
community activists**

Betina Durovni



Political Context

Universal Access

1988 – Federal Constitution

1990 – Universal Health System

Characteristics of AIDS activism in Brazil

- Early governmental response
- Strong civil society participation in all decision levels
- Multisectorial mobilization
- Balanced prevention & treatment approach with human rights perspective in all strategies and actions

Background and Rationale HIV/TB in Rio de Janeiro

- TB incidence 100 /100.000 people
- HIV prevalence in general population <1%
- TB is leading AIDS OI diagnosis in Rio, 20-40% prevalence
- ARVs are available free of charge in the public sector
- HAART currently recommended at CD4 \leq 350
- 24.000 HIV-infected patients receiving HAART
- IPT recommended by national guidelines but rarely used

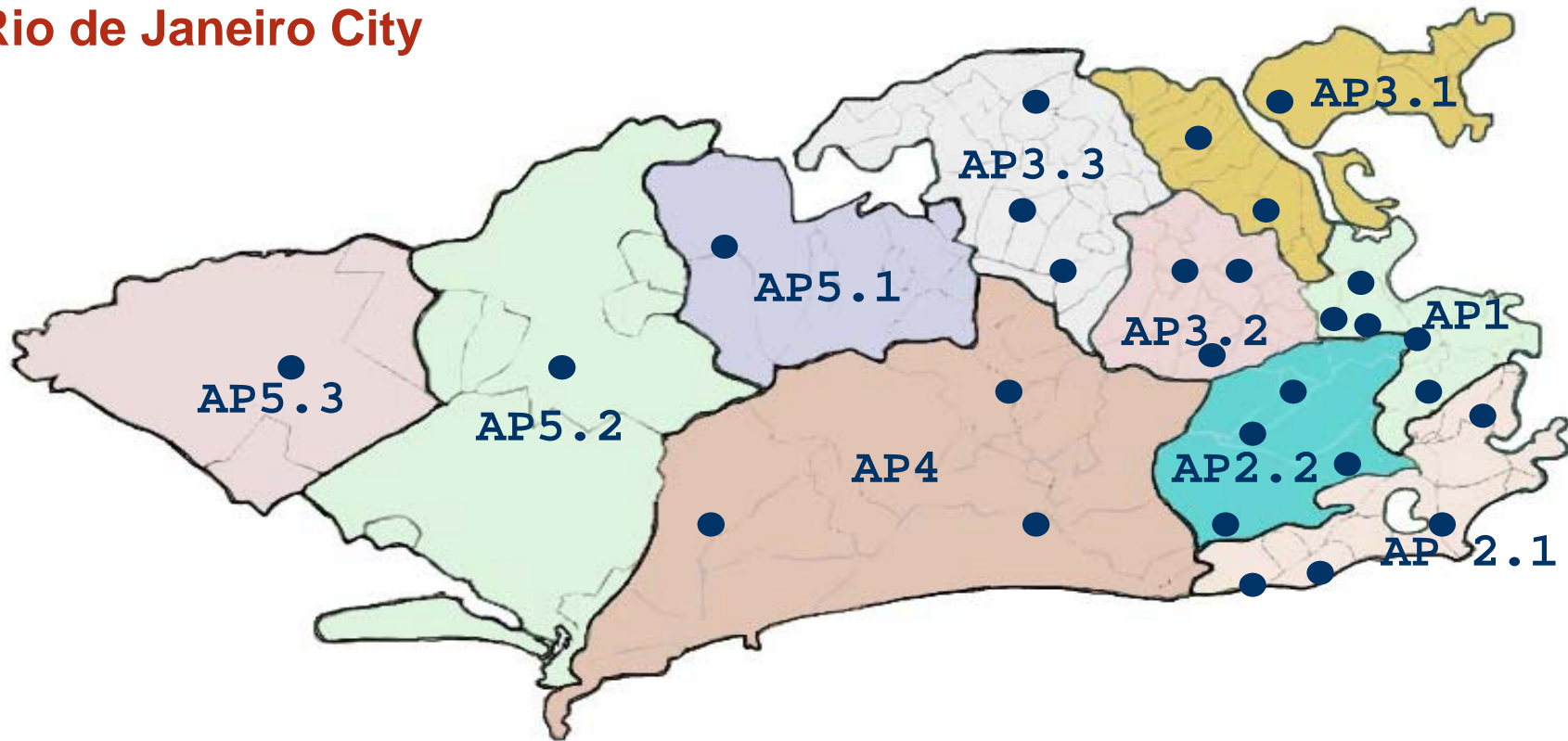
Impact of Widespread Use of TB Preventive Therapy for Patients with Access to Antiretroviral Therapy in Rio de Janeiro, Brazil:

A Phased Implementation Trial



Setting

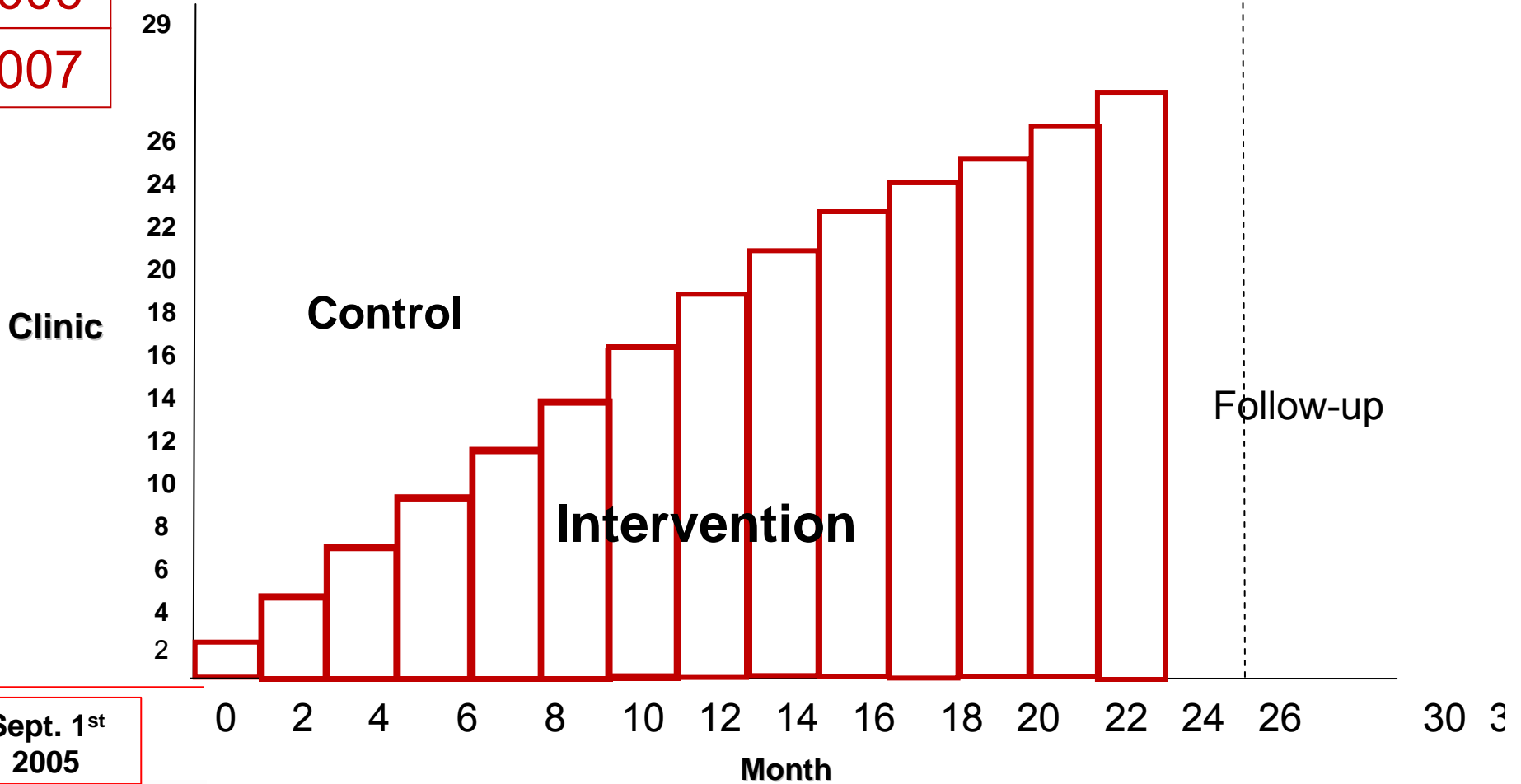
29 Public Health units managed by the Health Department of Rio de Janeiro City



Methods – Study Design

Control group: Clinic populations that have not yet been phased-in to begin implementation

2005
2006
2007



Sept. 1st
2005

Numbers so far

Characteristics of patients at

	baseline	N	%
Eligible		10845	74,57
Prior INH		1042	7,16
Prior TB		2577	17,72
Both INH & TB		79	0,54
Total		14543	

New patients after Sept 2005 > **2000**

Number of charts reviewed: **36,000**

Intervention for scale up IPT

- Training of HCW
- Development of educational materials for doctors and patients
- Clinical summary to help physicians making decisions
- Policy and advocacy activities
- Weekly supervision and reports
- Weekly meeting of THRio staff
- Two annual meetings with all the units under intervention and the THRio staff

Number of people trained

Type of training	Health Units	Number Trained
TB-HIV	26	534
PPD	24	120
Counseling	26	111
HIV Activists		21

**SE VOCÊ
TEM HIV,
faça o teste
da tuberculose**

**A TUBERCULOSE
PODE SER EVITADA**

**SE VOCÊ TEM
TUBERCULOSE,
faça o teste
anti-HIV**

**A AIDS TEM
TRATAMENTO**

VOCÊ SÓ TEM A GANHAR!

ESTE POSTO DE SAÚDE ESTÁ PREPARADO PARA AJUDAR VOCÊ. PEÇA INFORMAÇÕES AO PROFISSIONAL DE SAÚDE.

PRÉ-CO
PREFEITURA
SAÚDE

FRRio
TB/HIV NO RIO

CREA **f**E

Por que a Aids e a Tuberculose, juntas, são tão perigosas

Saber Viver

Edição Especial Tuberculose
MAIO/2003 - DISTRIBUIÇÃO GRATUITA

PREVENÇÃO NA HORA CERTA

Mara fez o tratamento preventivo da tuberculose em 1999 e não desenvolveu a doença

Detalhes sobre o tratamento preventivo da tuberculose

FRRio
TB/HIV NO RIO

CREATE

New Materials

TUBERCULOSE E AIDS



Nossa meta é que elas só apareçam juntas na capa deste folheto.



A ameaça da tuberculose em pacientes HIV+ tem solução.

A tuberculose (TB) é uma das doenças oportunistas que mais afetam os pacientes infectados pelo HIV. Essa combinação perigosa é uma das mais frequentes causas de morte entre esses indivíduos, com, aproximadamente, **um óbito em cada dez infectados no Rio de Janeiro.**

As diretrizes do Ministério da Saúde enfatizam a necessidade da realização do PPD nos portadores de HIV, bem como da realização da profilaxia com isoniazida nos pacientes que têm infecção tuberculosa latente. Infelizmente, o alcance destas políticas ainda não é significativo.

A terapia preventiva com isoniazida reduz de 70 a 90% o desenvolvimento da tuberculose em pacientes infectados por HIV.



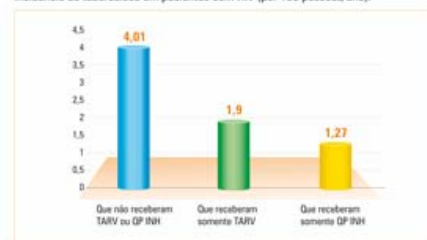
Para determinar se a quimioprofilaxia com isoniazida (QP INH) em pacientes soropositivos – que estejam recebendo terapia anti-retroviral – reduz a incidência de tuberculose latente nesses indivíduos, a Coordenação de Doenças Transmissíveis da Secretaria Municipal de Saúde está realizando uma ampla pesquisa: o **Estudo THRio - TB/HIV no Rio.**

No período de 01/09/2003 a 01/09/2005, foram analisados os prontuários de 12.129 pacientes portadores de HIV que vinham recebendo tratamento médico em 29 unidades de saúde do Município.

A tuberculose ocorreu em **2,28%** dos portadores de HIV no Rio de Janeiro.

Veja abaixo as incidências por uso de terapia anti-retroviral (TARV) e/ou quimioprofilaxia para TB com isoniazida (QP INH).

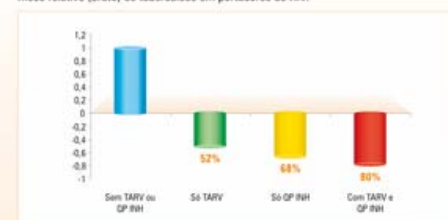
Incidência de tuberculose em pacientes com HIV (por 100 pessoas/ano):



Galuk et al., AIDS 2007

Neste primeiro estudo, a redução da tuberculose associada à combinação de quimioprofilaxia com isoniazida vem sendo comprovada, tanto em pacientes com quadros mais graves quanto naqueles em estágios menos avançados da infecção pelo HIV.

Risco relativo (bruto) de tuberculose em portadores de HIV:



Galuk et al., AIDS 2007

Os resultados indicam que a propagação em larga escala do uso da isoniazida entre as populações portadoras do HIV é urgente e importante.

A indicação do PPD e o incentivo constante para que os pacientes realizem a profilaxia podem salvar vidas e, com certeza, fazem uma grande diferença no dia-a-dia de milhares de pacientes.

The THRio CAB

- started before the intervention
- Advises and monitors the decisions and developments within the scope of THRio
- Independent from the Transmissible Disease Coordination at the Health Secretariat
- Have their own statutes and autonomy to define their role

Representatives on CAB

- Representatives from
 - PVOs/NGOs
 - People living with HIV/AIDS
 - Health professionals
 - University representatives
- All members are volunteers

Main Tasks

- To look after issues related to:
 - human rights
 - ethical considerations
 - voluntary participation
- Review the study protocol
 - in accordance with the rights and responsibilities established under Brazilian law 196/96,
- Assist in community mobilization concerning prevention of TB in people living with HIV/AIDS

Cont.

- ensure that the rights of research participants are considered in all aspects of the study
- provide participants and the community an independent source of information about the research
- contribute to study team in the planning, development and implementation of the research
- follow the development of the research ensuring that emerging issues are considered by the study team

Important advances

- THRio PAC team structured
- Community and research Workshop (May 2007 – Ezio Tavora)
- First training of 23 HIV activists
 - TB treatment literacy
 - Interest in research methods
 - Two-way street
 - CAB and activists also train researchers
 - Clear need of further meetings

Physician Adherence to HIV and TB Guidelines in Rio de Janeiro, Brazil

SARACENI V, DUROVNI B, KING BS, ELDRED L, CHAISSON RE

PS-71800-10, Saturday, 10 November 2007

Guidelines	Proportion (%)
PCP prophylaxis*	97
CD4 monitoring	96
Viral Load testing	93
TST applied, ever	45
IPT, when TST \geq 5 mm	11

Qualitative Inquiry

Interviews and focus groups with TB and HIV physicians, nurses and local administrators from clinics with different performances, what they said?

- HIV patients resistance to do the TST exist and according to the physicians, nurses and local managers the main reasons for that are:
 - TST takes a lot of time and patients are afraid of TST
 - The complexity of HIV treatment and HIV patients' style of life are very important limitations to TB prevention
 - IPT adverse effects are an important issue for the physicians and they are concerned about that.

Strategies

PAC strategies

- New communication strategies for physicians (eg Stop TB statement, prominent researchers)
- New training models for health professionals
- Learn from the HIV community how to improve our messages
- Overcome language barrier
- Raise awareness about TB among HIV community
- Local TB-HIV working group
- Concerted effort designed to improve Brazilian Health System

TB & HIV

FIND TB

Undiagnosed TB is common in PLHIV

TREAT TB

Early treatment saves lives
Treatment reduces transmission

PREVENT TB

Isoniazid preventive therapy (IPT) works

Obrigada!!
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