

Shorter DR-TB Implementation update

THE KINGDOM OF ESWATINI

Outline

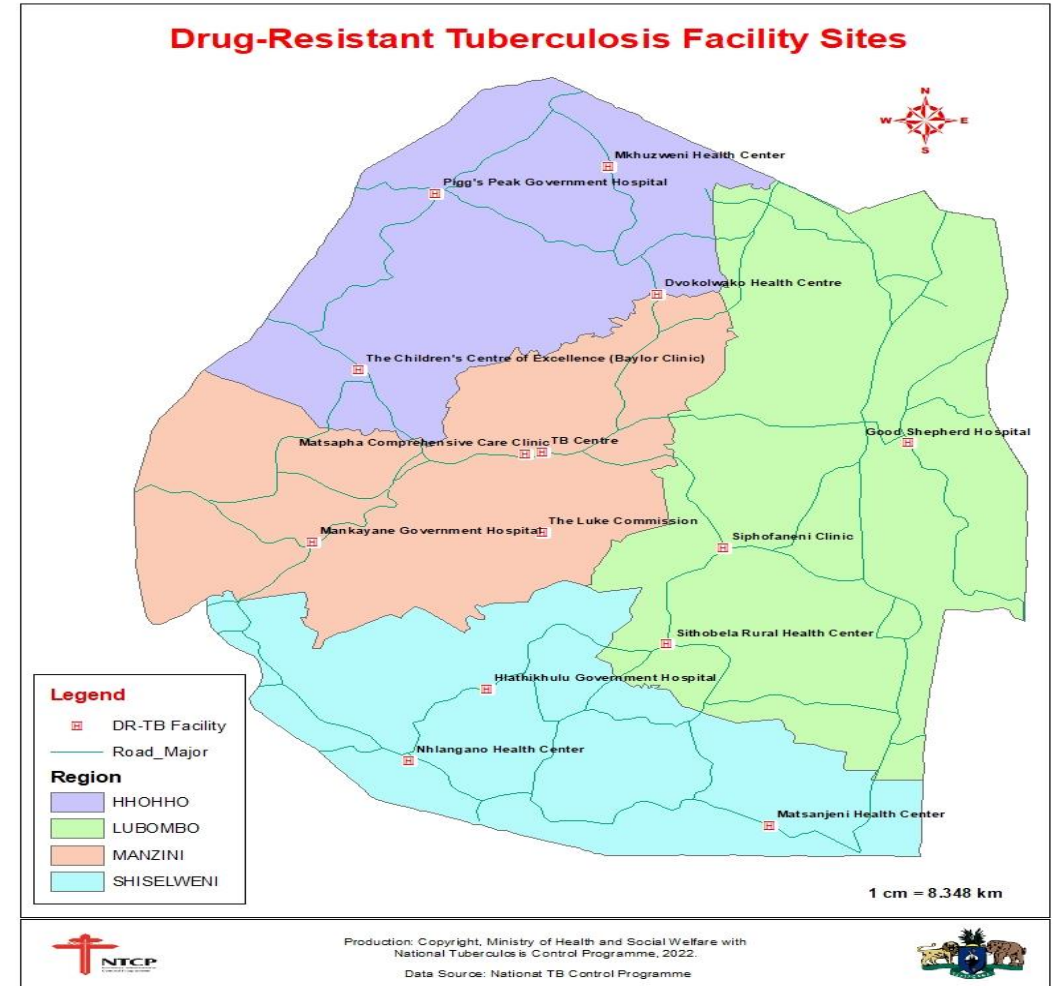
- ❖ Country Context and TB Burden
- ❖ Adoption and Implementation process for BPaL
- ❖ Eligibility criteria for shorter DR-TB Regimens
- ❖ Progress so far
- ❖ Achievements, challenges and best practices

Eswatini country context



Population 1 201 670
Divided into 4 regions

151 TB Treatment Units
14 DR-TB sites
35 GeneXpert Sites (38 machines)
2 Culture Laboratories



TB BURDEN IN ESWATINI

- ⊕ Eswatini is still among the 30 countries with the highest TB/HIV burden globally
- ⊕ Highest HIV prevalence globally: 24.8 %
- ⊕ TB/HIV co-infection: 65% (Global TB Report, 2023)
- ⊕ DR-TB/HIV co-infection: 71% (NTP Annual Report, 2023)

- TB incidence (rate): 325/100 000
- TB incidence (number): 3 900
- TB incidence (HIV positive): # 3 900
- Notified cases (new & relapse) : 2 374
- Missed cases (Gap) - 39%

Incidence

- **Estimated RR/MDRTB incidence (rate): 25/100 000**
- **Estimated RR/MDRTB incidence (number): 230**
- **Incidence among new cases: 4.4%**
- **Incidence among Previously treated: 32%**
- **Notified cases RR/MDRTB cases: 119**
- **Treatment coverage: 29%**

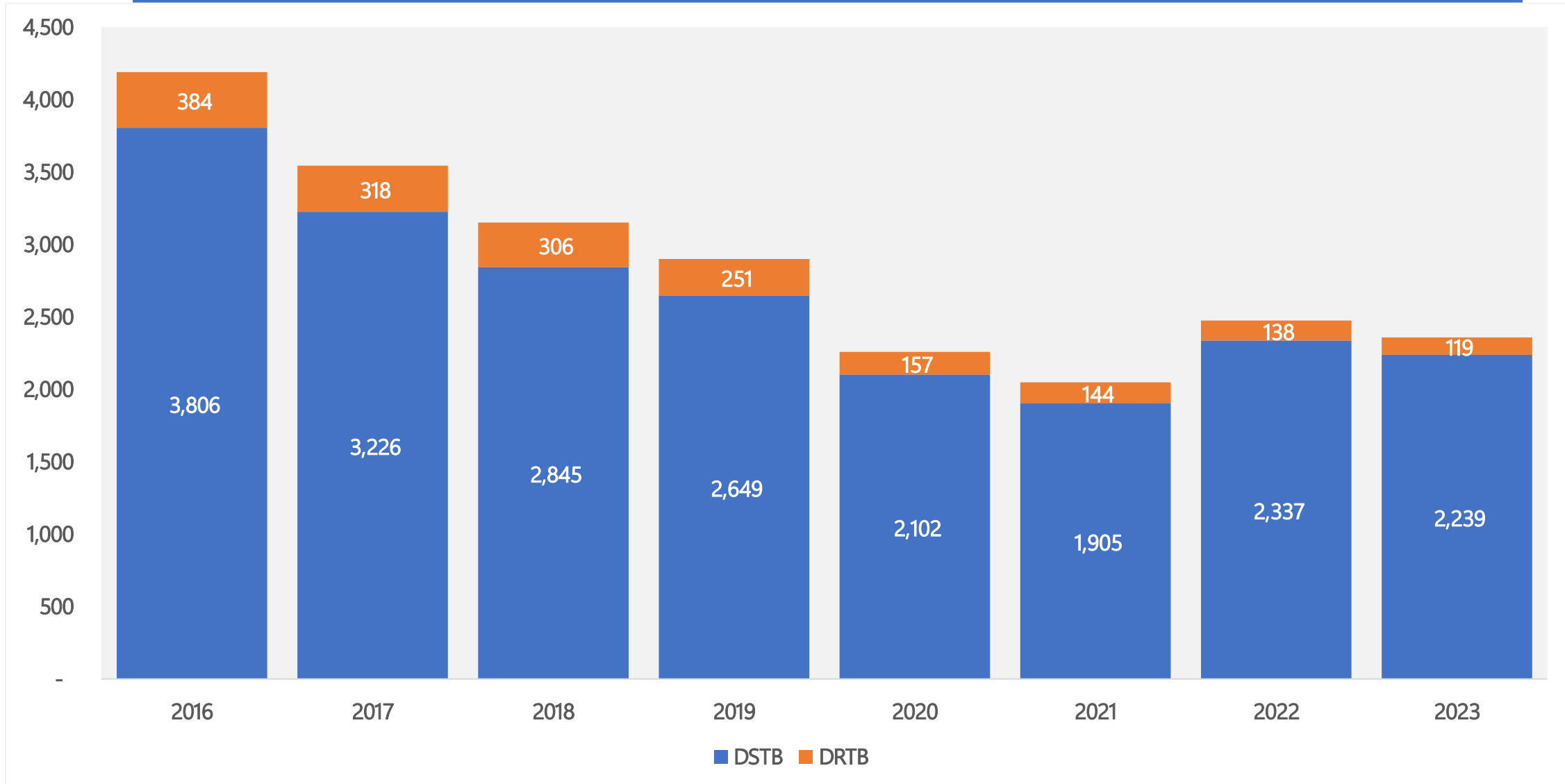
RR/MDRTB

- TB Mortality rate (HIV -): 25/100 000
- TB Mortality # (HIV -): 310
- TB Mortality (HIV +): 54/100 000
- TB Mortality # (HIV -): 650
- TB Mortality: 79/100 000

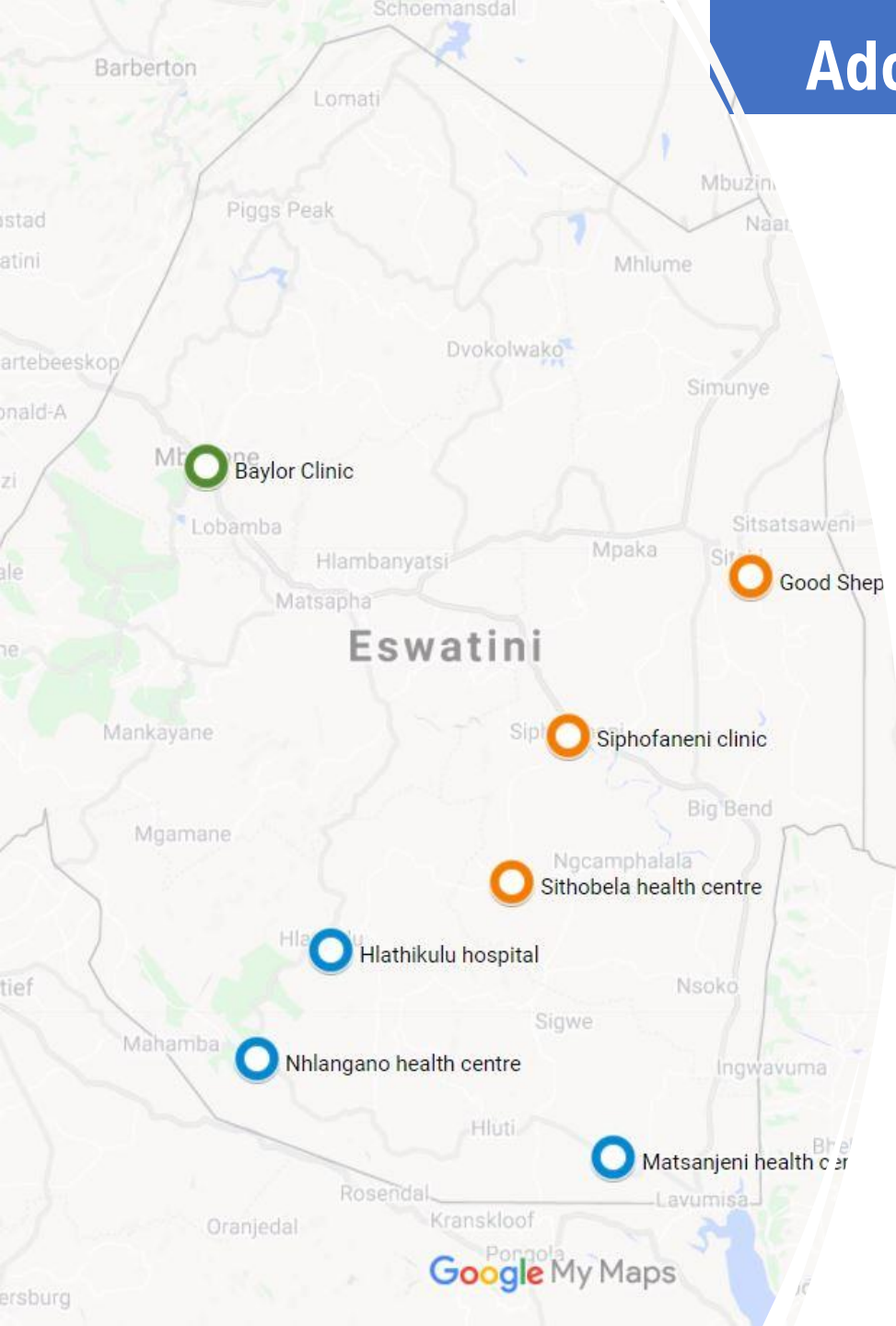
Mortality



TB CASE NOTIFICATION, 2020-2023



Adoption of the oral short course MDR-TB Regimen

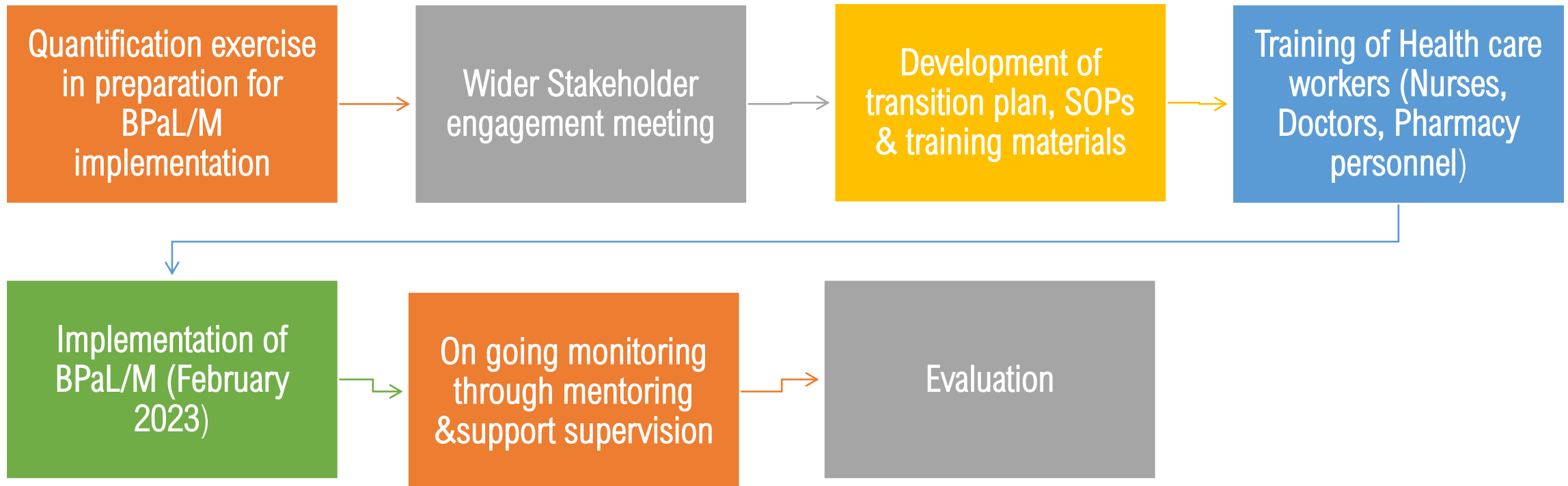


- ❑ Started as an operational research with support from MSF in March 2020
- Mainly in two regions
 - 3 sites in Shiselweni region
 - 3 sites in Lubombo
- Also conducted in specialized pediatric health care facility (Baylor)

- ❑ The GLC mission in July 2021, recommended that the country adopt the oral short course DR-TB regimen and scale it up to all DR-TB sites.

- ❑ In September 2021 it was rolled out to the rest of the regions.

Steps towards BPaL/M Implementation



Eligibility criteria

BPaLM/BPaL

- ✓ People with MDR/RR-TB or with MDR/RR-TB and resistance to fluoroquinolones (pre-XDR-TB).
- ✓ People with confirmed pulmonary TB and all forms of extrapulmonary TB except for TB involving CNS, osteoarticular and disseminated (miliary) TB.
- ✓ Adults and adolescents aged 14 years and older.
- ✓ All people regardless of HIV status.
- ✓ Patients with less than 1-month previous exposure to bedaquiline, linezolid, pretomanid or delamanid.
 - ✓ When exposure is greater than 1 month, these patients may still receive these regimens if resistance to the specific medicines with such exposure has been ruled out.
- ✓ The recommended dose of linezolid is 600 mg once daily, both for the BPaLM and the BPaL regimen.

Modify shorter

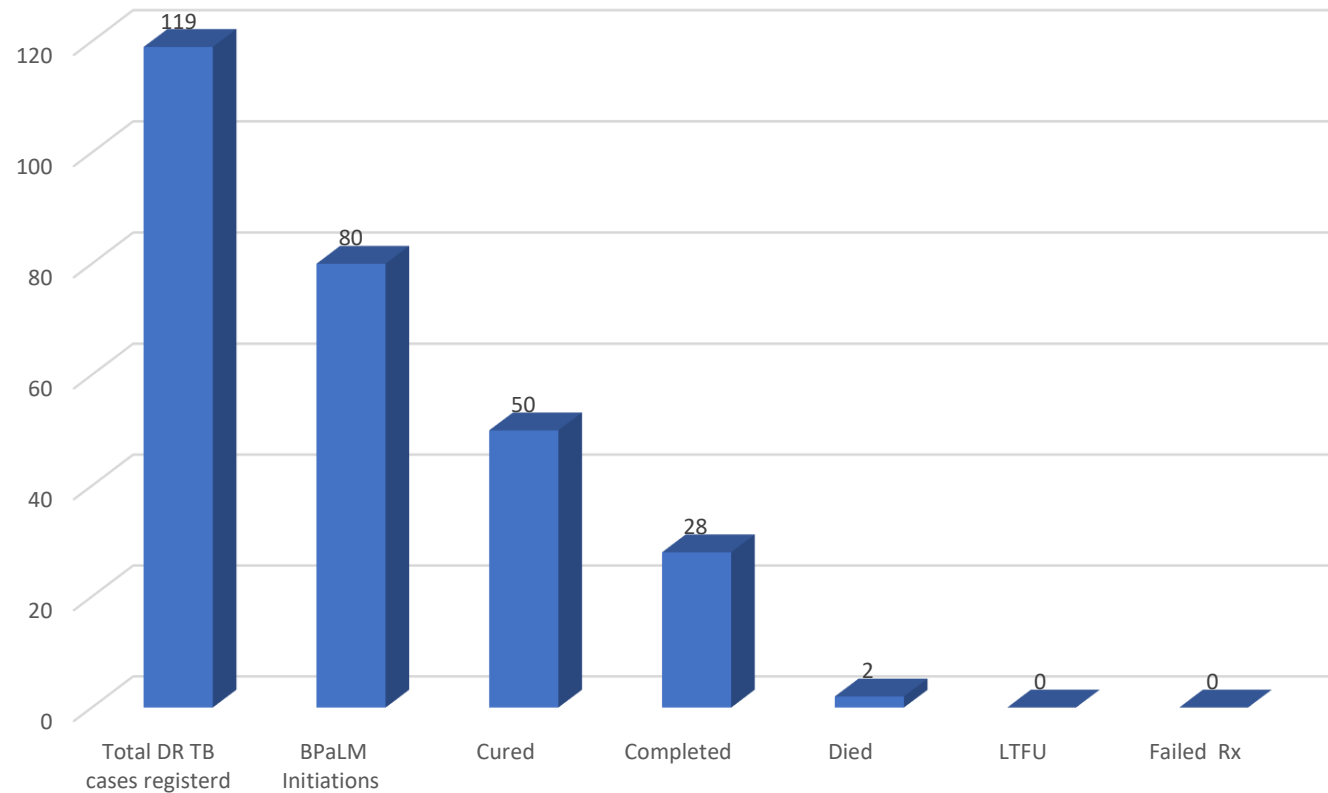
- ✓ RIF resistance detected by GeneXpert
- ✓ RIF mono or MDR resistance detected by phenotypic DST who are not eligible BpaLM/BPaL
- ✓ Poly-drug resistance detected by phenotypic or genotypic DST and Inh mono resistance
- ✓ Clinically diagnosed TB case who had a close household contact meeting the eligibility criteria for OSCT
- ✓ AND informed written consent provided
- ✓ AND informed written assent for children 14years and below
- ✓ Pregnant and lactating women
- ✓ TB patients who are diagnosed with severe forms of TB (CNS, osteoarticular and disseminated (miliary) TB).

BPaL & BPaLM cases notified 2023-2024

DR-TB cases by regimen	2023	Q1-2024
Shorter MDR Regimen	15	5
Longer MDR Regimen	2	0
MDR+FQ Regimen	0	1
INH Mono Regimen	17	7
BPAL/BPALM	80	16
Other Reg	5	1
Total	119	30

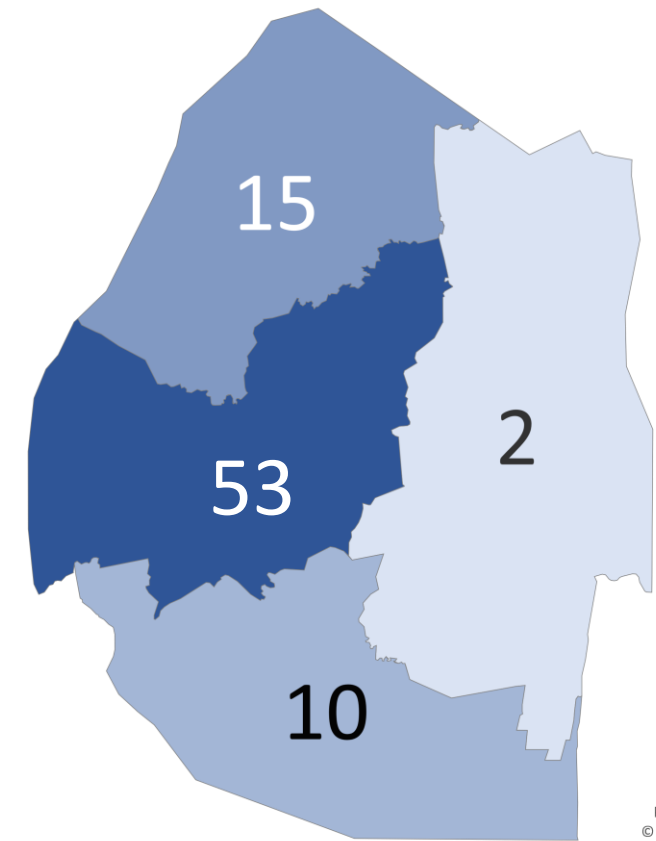
Case notification and treatment outcomes, BPaLM/BPaL, 2023

Chart Title



Treatment success 97.5%

BPaL/M Case notification by Region



Best practices and Lessons learnt

- Less adverse events that may lead to patients being admitted.
- High treatment success rate due to shorter treatment duration.
- None of the patients were LTFU as the result of few months in treatment
- Well received by clients
- Target for initiation met, 67% against 60% for 2023

Challenges

- Slow implementation in the initial stages only 3 facilities were active
- Suboptimal mentorship and support supervision due
- Stock out of commodities.

ACKNOWLEDGEMENTS



