



# HANSA-2 (PBC 7) Implementation

## Progress update in 2024

### (January to Jul)

- 1. TB epidemic in Lao PDR**
- 2. End TB strategy**
- 3. TB program achievements**
- 4. HANSA2 PBC 7: Reach the unreached to End TB**
- 5. HANSA2 TB achievements**
- 6. TB program activities conducted from January to Jun 2024**
- 7. NTP challenges and next steps**

# 1. TB epidemic in Lao PDR

## Estimates of TB burden, 2023

*Method for the estimation of incidence (2023): Extrapolated from pre-2020 trends as published in 2020 for countries with no shortfall in notifications compared with 2019.*

Total TB incidence (Number) = 10 000 (6 200-15 000)  
Total TB incidence (Rate per 100 000 population) = 132 (81-197)

HIV-positive TB incidence (Number) = 470 (280-710)  
HIV-positive TB incidence (Rate per 100 000 population) = 6 (4-9)

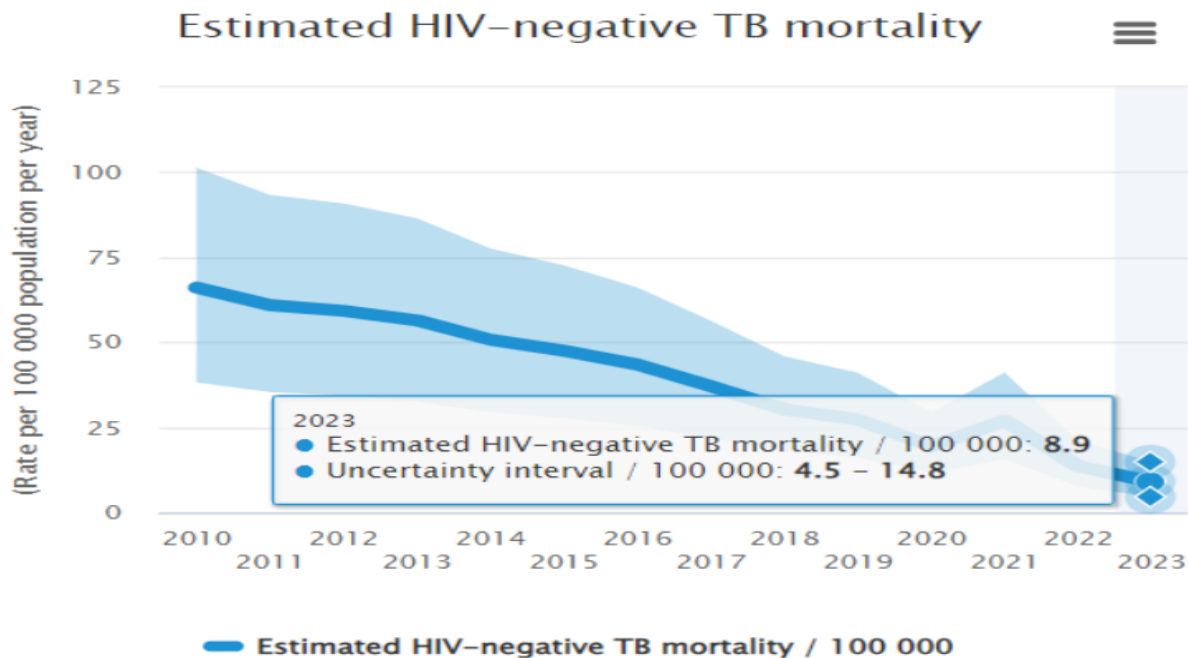
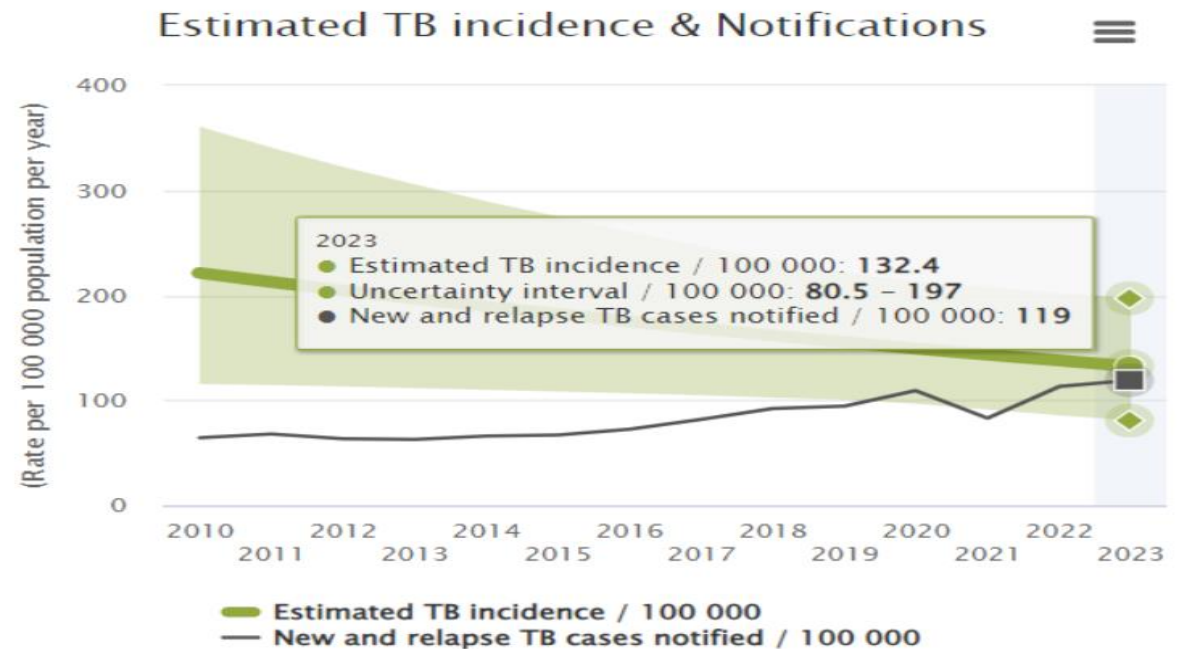
MDR/RR-TB incidence (Number) = 63 (31-95)  
MDR/RR-TB incidence (Rate per 100 000 population) = 1 (0-1)

*Method for the estimation of mortality (2023): see section "4.3 Estimating TB mortality among HIV-negative people from estimates of case fatality rates and TB incidence" in the [technical appendix](#).*

HIV-negative TB mortality (Number) = 680 (340-1 100)  
HIV-negative TB mortality (Rate per 100 000 population) = 9 (5-15)

HIV-positive TB mortality (Number) = 76 (44-120)  
HIV-positive TB mortality (Rate per 100 000 population) = 1 (1-2)

Source: WHO Lao PDR draft country profile 2024



# 2. END TB Strategy



## The End TB Strategy: Vision, Targets and Pillars



### Vision:

**A world free of TB**

*Zero TB deaths, Zero TB disease, and Zero TB suffering*

### Goal:

**End the Global TB epidemic**

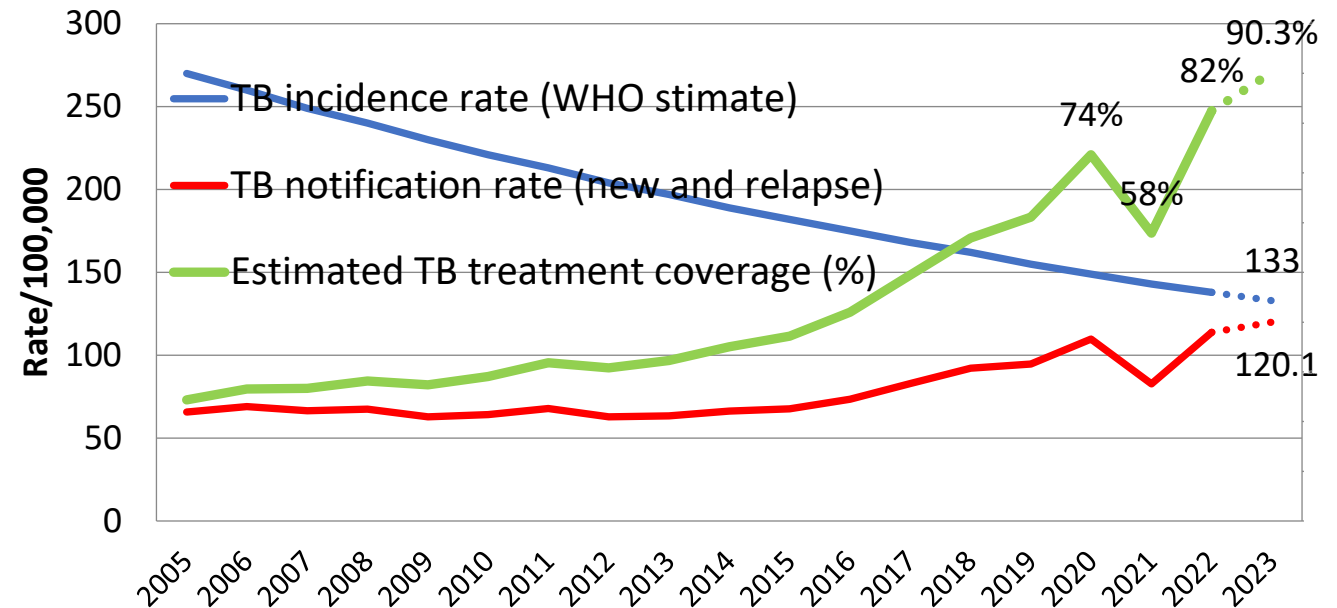


	MILESTONES		TARGETS	
	2020	2025	SDG* 2030	END TB 2035
<b>Reduction in number of TB deaths</b> <small>compared with 2015 (%)</small>	35%	75%	<b>90%</b>	<b>95%</b>
<b>Reduction in TB incidence rate</b> <small>compared with 2015 (%)</small>	20%	50%	<b>80%</b>	<b>90%</b>
<b>TB-affected families facing catastrophic costs due to TB (%)</b>	0%	0%	<b>0%</b>	<b>0%</b>

# 3. TB program achievements (2023)

Year	2020	2021	2022*	2023*
Population # (U.N.)	7.3 M	7.4M	7.5M	7.6M
TB incidence rate/100k pop. # (WHO estimates) (a)	149 (11,000)	143 (10,582)	138 (10,350)	133 (10,108)
Notification rate/100k (new & relapse) (b)	109.8	82.7	114	120
TB treatment coverage (b/a)	74%	58%	84%	90%
Presumptive TB tested for diagnostic (new test) #	46,006	34,880	44,825	48,393
Population testing rate for TB %	0.63%	0.48%	0.60%	0.64%
Presumptive TB with GeneXpert valid test (Xpert MTB testing coverage) %	40,878 (89%)	34,254 (98.2%)	43,866 (98%)	47,128 (97%)
Notified TB cases new and relapse #	8,013	6,123	8,686	9,124
Bacteriologically confirmed PTB new and relapse # and %	4,462 (55.7%)	4,001 (65.3%)	5,421 (62.1%)	5,625 (61.7%)
TB notified from ACF # (%)	2,120 (27%)	1,159 (19%)	2,031 (24%)	2,176 (24.5%)
TB in children 0-4 #	18	8	26	36
TB in children 5-14 #	55	43	69	67
TB notified by community/CSOs #	430	270	412	419
TB notified by private sector #	193	21	25	32
TB notified in prisons # (non ACF)			171	219
Treatment success of drug sensitive TB (new and relapse)	89.9% (6,087/6,770)	88.6% (7,183/8,112)	88.5%* (6,732/7,610)	-
TB patients with HIV test # (% among all TB cases)	6,618 (83%)	5,221 (84.5%)	7,679 ,8,776 (87.5%)	7,968 ,9,095 (87.6%)
TB/HIV treatment coverage # (% of TB/HIV estimated incidence)	369/610 (60%)	307/610 (51%)	349/470 (74%)	369/470 (78.5%)
TB/HIV patients on ARV# (%)	300/369 (81%)	257/307 (84%)	254/349 (73%)	287/369 (78%)
New PLHIV started TPT (CHAS)	598 (60%)	560 (56%)	613 (61%)	703 (70%) 3q
Children under 5 started IPT (estimated 0.4 per household of pulmonary MTB+)	316/1,781 (18%)	175/1,594 (11%)	286/2,128 (13%)	304/2,173 (14%)
DR-TB patients enrolled # % enrolled among diagnosed	41/49 (84%)	40/44 (90%)	44/52 (85%)	37/42 (88%)
DR-TB treatment success	30/41 (73%)	33/40 (82%)	31/44 (70%)	

TB treatment coverage of WHO incidence estimate (new and relapse all forms), 2005-2023 \*



\*DHIS2 TB tracker data, 2023 preliminary data with estimated TB incidence 133/100k

## **4. HANSA 2 PBC 7: Reach the unreached to End TB**

**PBC 7 : Increase TB prevention and care coverage and reaching the unreached to End TB**

### **PBC Condition 1:**

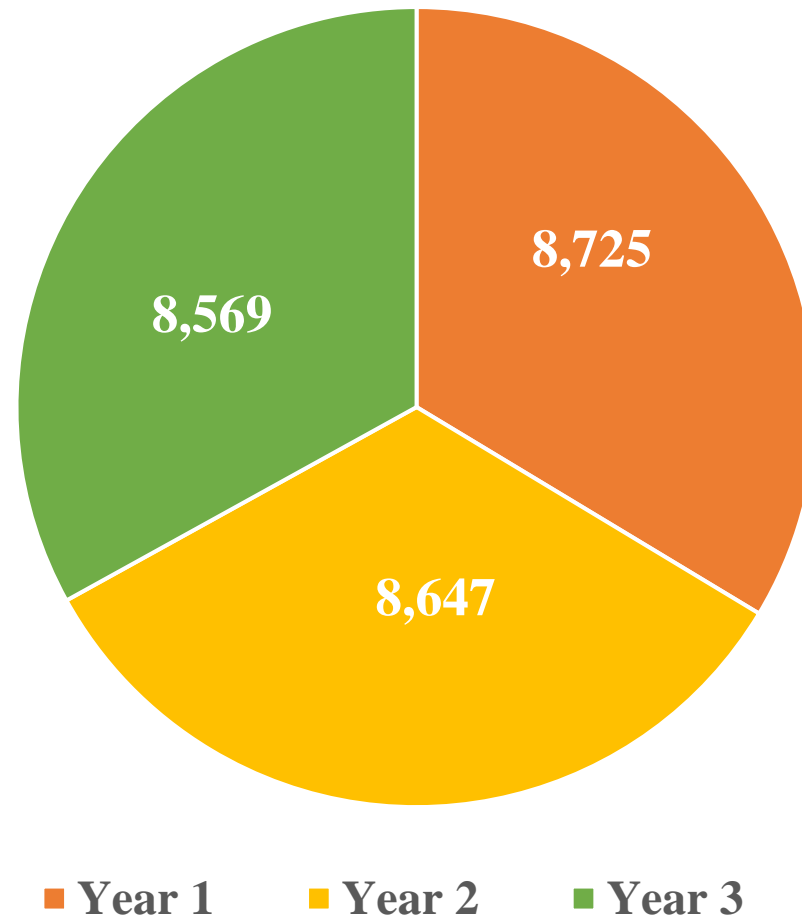
**Number of notified TB cases of all forms (New and Relapse)**

### **PBC Condition 2:**

**Number of household contact children under 5-year-old received Tuberculosis**

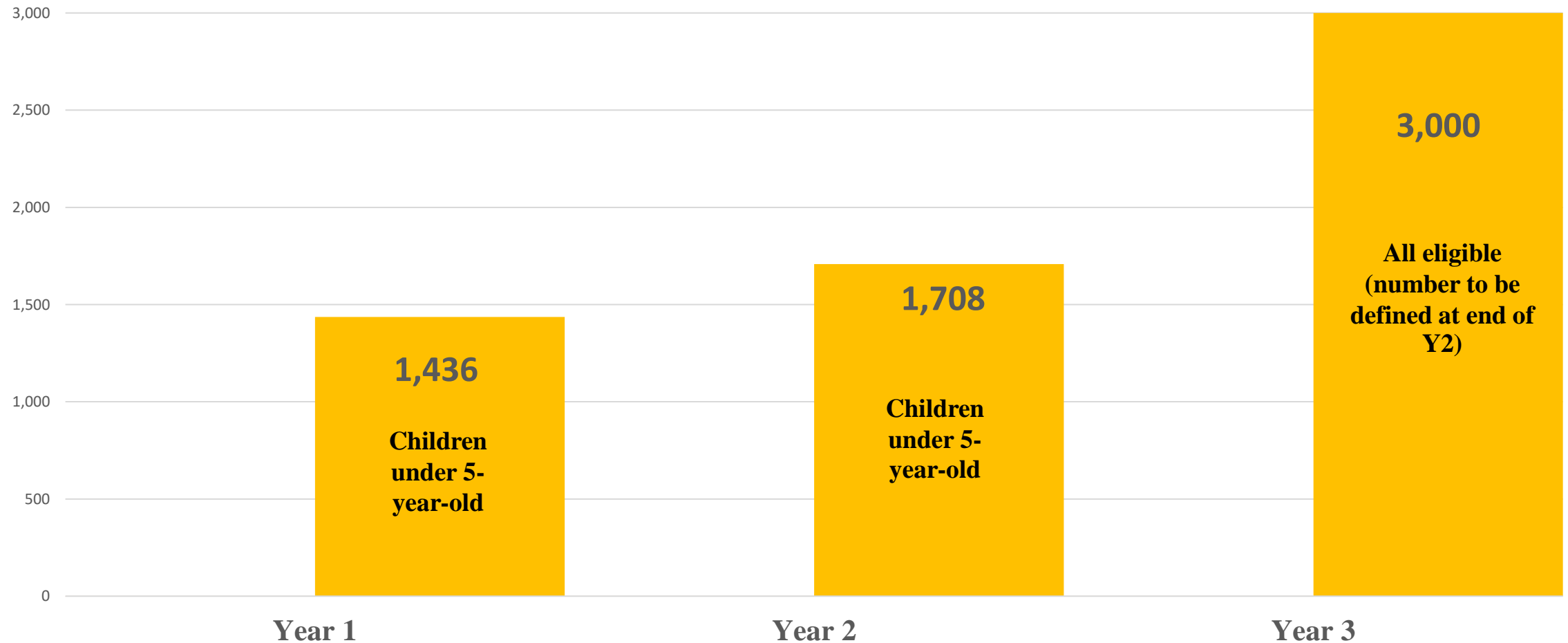
**Preventive Treatment**

## 4.1 HANSA 2 PBC 7 Condition 1: Number of notified TB cases of all forms (new and relapse)



## 4.2 HANSA2 PBC 7 Condition 2

# Number of household contact eligible received Tuberculosis Preventive Treatment (TPT)





## 4.3 HANSA 2 PBC 7 activities

### 2.1 Training related per diems/transport/other costs

- Training province and district TB staff, HCs, VHVs, prison nurses based on updated National TB manuals on screening, diagnosis, treatment, contact investigation, M&E;
- On site coaching by MDR unit team at district/health centre level for ambulatory treatment management;
- Practical Approach on Lung Health (PAL) Course for Hospital doctors at central province and district levels for TB staff including OPD, IPD;
- Training of central province and district doctors on management of MDR-TB
- Training of radiologist and technicians on chest X-ray reading in province and district hospitals and prisons
- Training on GeneXpert and Lab SOPs for lab technicians
- Train HIV/AIDS workers on screening of active TB and LTBI at province and district levels (in ART and other POC)

### 2.3 Supervision/surveys/data collection related per diems/transport/other costs

- TB/HIV joint on site visits to selected sites (ARTs, POCs) once a quarter by NTC and CHAS
- Monitoring visits by provincial level to district and health center levels; and supervision by District level to 1000 health centres;
- Operational costs for Active case finding (ACF) in prisons, high TB burden districts;
- TB tracker on site coaching in all 162 TB units (central, provincial and district levels) for DQA;
- TB patients' home visit to screen all HHC including children (5,500 BC TB patients per year) and TPT;
- HCs staff conduct home visits to follow-up TB patients treatment and HHC children and adults receiving TPT by HC staff
- Community based TB interventions conducted by CSOs in selected districts

**2.5 Transport samples of presumptive and diagnosed TB patients; 100% samples from district and health centres sent to Xpert laboratory.**

## 4.3 HANSA 2 GF Input based activities

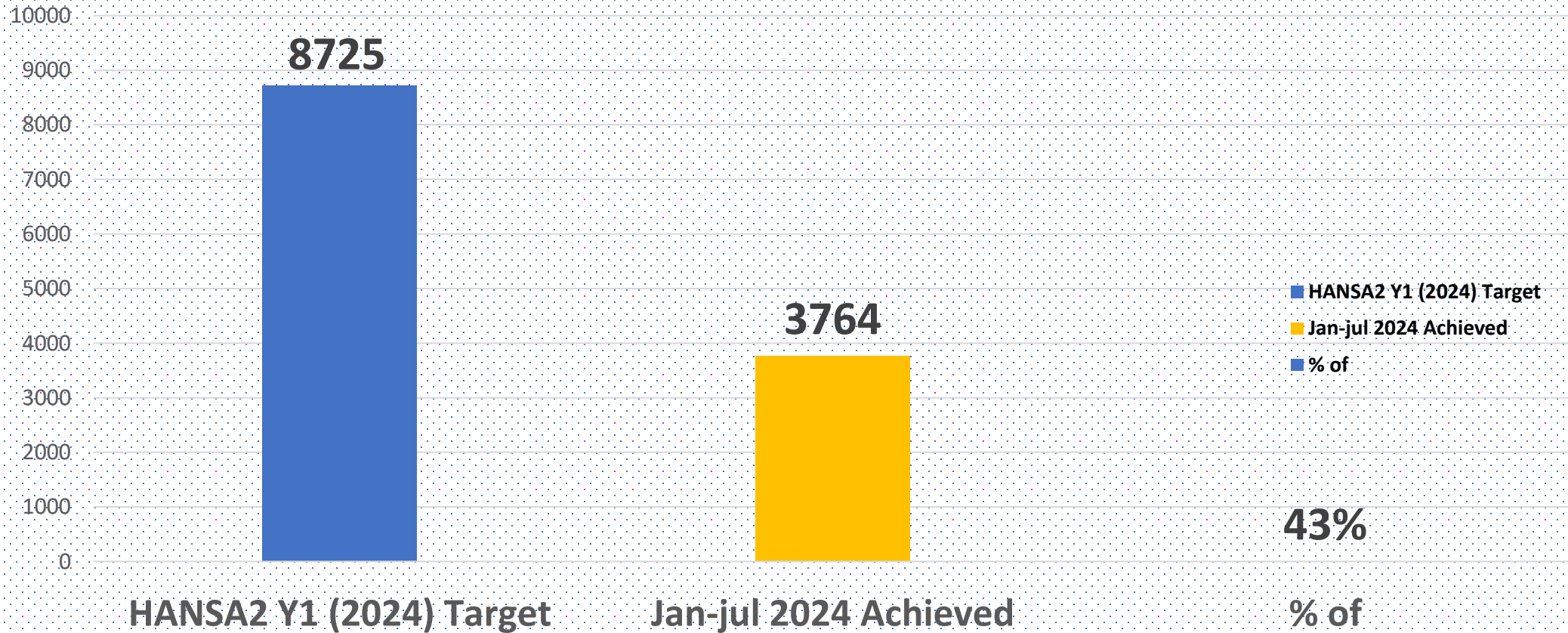
- Procurement of TB diagnostics (GeneXpert cartridges) and medicines (100% Y1, 80% Y2 and 60% Y3 for first line TB drugs)
- Procurement of health equipment (laboratory equipment and X-ray machines)
- Technical assistance
- Matching funds for Laboratory through NCLE

## 4.4 Co-financing investment and activities

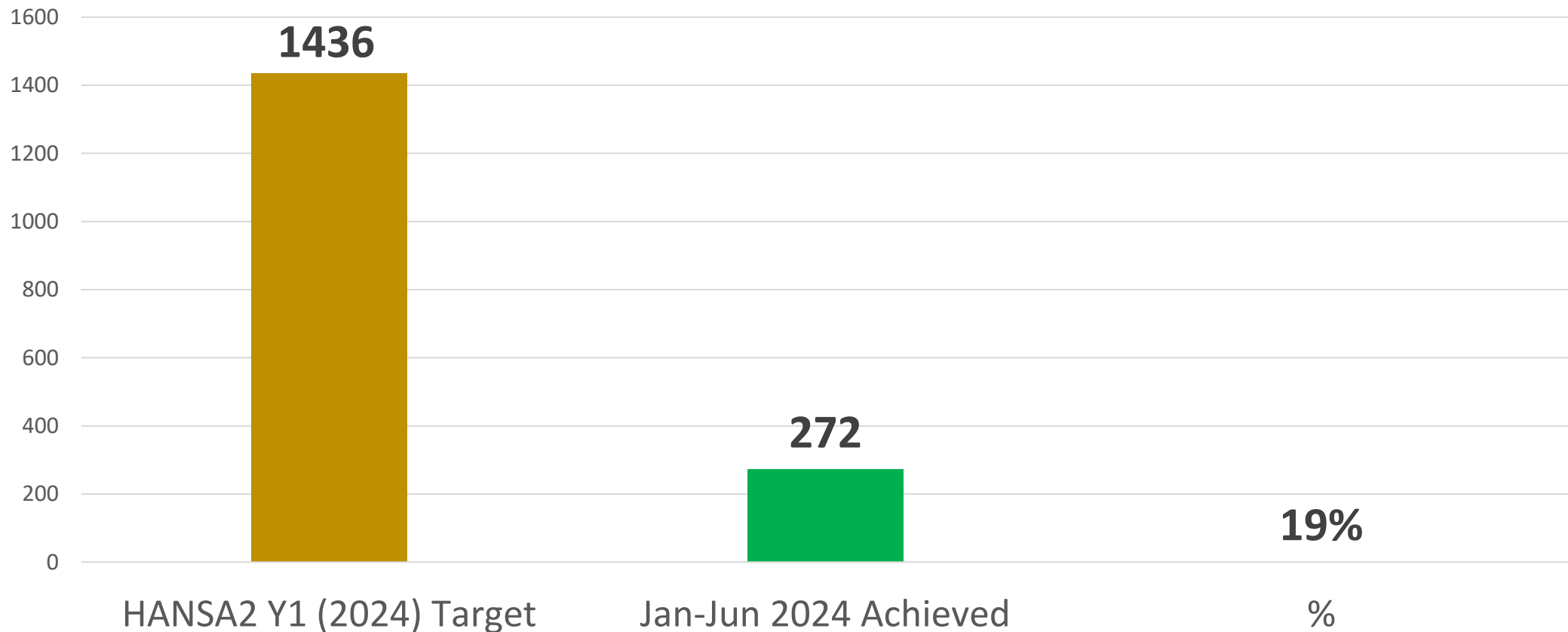
- Communication material and printing for TB program
- Additional training and supervision
- Additional ACF operational costs for provinces and prisons
- Procurement of TB Medicines (first line TB drugs) and diagnostics (0% in Y1, 20% in Y2 and 40% in Y3)
- Procurement of health equipment (laboratory reagents and consumables and additional digital X-ray machines for ACF teams and high TB burden district hospitals)

# 5.1 HANSA 2 PBC 7.1 Number of notified TB cases of all forms (New and Relapse) January to Jul 2024

Number of notified TB cases



## 5.2 HANSA 2 PBC7.2 Number of household contact children under 5-year-old received TPT January to Jul 2024



## 6. TB program activities conducted from January to Jun 2024

- Achieving orders of TB drugs and diagnostic tests procurement with GF direct payment (TB drugs to arrive in country August-December 2024),
- Updating National guidelines and testing during training sessions in 5 provinces,
- Limited number of outreach ACF in remote districts,
- Updating the TB information system (TB tracker module 2) to monitor and report on TPT,
- Improving laboratory data management with NRL and NCLE,
- World TB day in Saysettha district hospital of Vientiane Capital
- Continued MDR management and culture follow-up,
- Online coaching on TPT with provinces and districts staffs,
- NTC and PTC coaching visits in selected remote districts on TPT and DQA for TB tracker

# 7 Gaps/Challenges/Next steps (1)

## Gaps/Challenges

- Just receive funding of the HANSA1 Year 3 to implement the activities to meet PBC7 targets:
  - Suffering of transportation of specimen to GeneXpert sites
  - Limited active case finding (ACF) due to lack of operational cost funding
  - Delay of conducting activities as home visit for contact examination by health center staff

## Next steps

- Urgent to disburse of the funds to the provinces and districts to conduct all the planned and budgeted high impact interventions to reach the PBC7 1 and 2 indicators targets including specimen transportation, outreach ACF and household contact examination, training and supportive supervision at all levels

# 7. Gaps/Challenges/Next steps (2)

## Gaps/Challenges

- Limited integration of TB related activities with other health interventions
- Delay in data entry and need for data quality improvement; Re-training is needed for data quality improvement;
- Need to decentralize and maintain the GeneXpert laboratory network including in selected high TB burden districts

## Next steps

- More advocacy and capacity-building local health providers at the district and health center levels.
- Continue and expand support to data entry staff by conduct refresher training, on site coaching or online to ensure the quality of data entry and real time
- DPF/NCLE and NTC/NRL to continue collaborating for management and maintenances of the GeneXpert laboratory network



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