Scale up of IPT in Viet Nam update

Steve Graham

Background

- Low numbers of child TB reported in Viet Nam - <1% of total caseload compared to WHO estimates of 10.7% globally
- Implementation of community-based child contact screening and preventive therapy
- Training of trainers in 2011 and development of tools for monitoring and IEC distributed to CHCs
- Piloted in four provinces since Q4 2012 – focus on improving case detection/diagnosis and preventive therapy for eligible child contacts
- Now includes 16 provinces

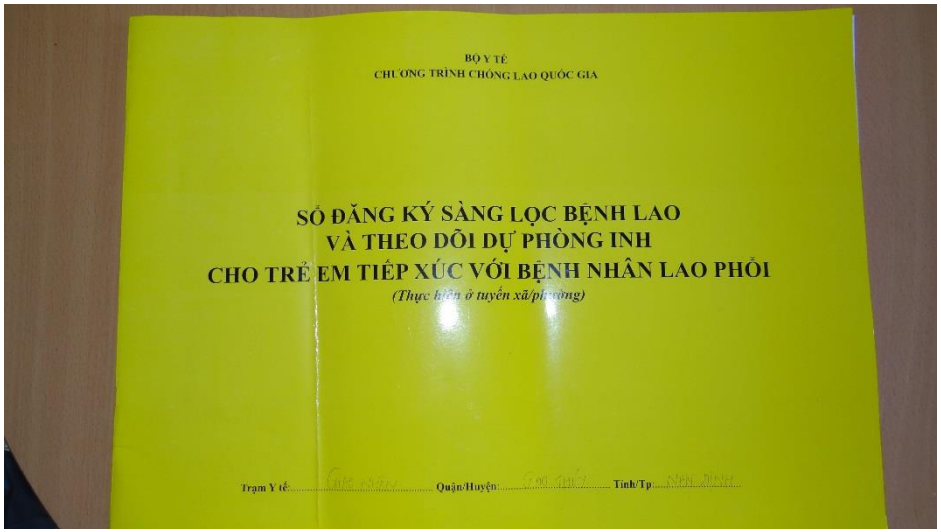
Background

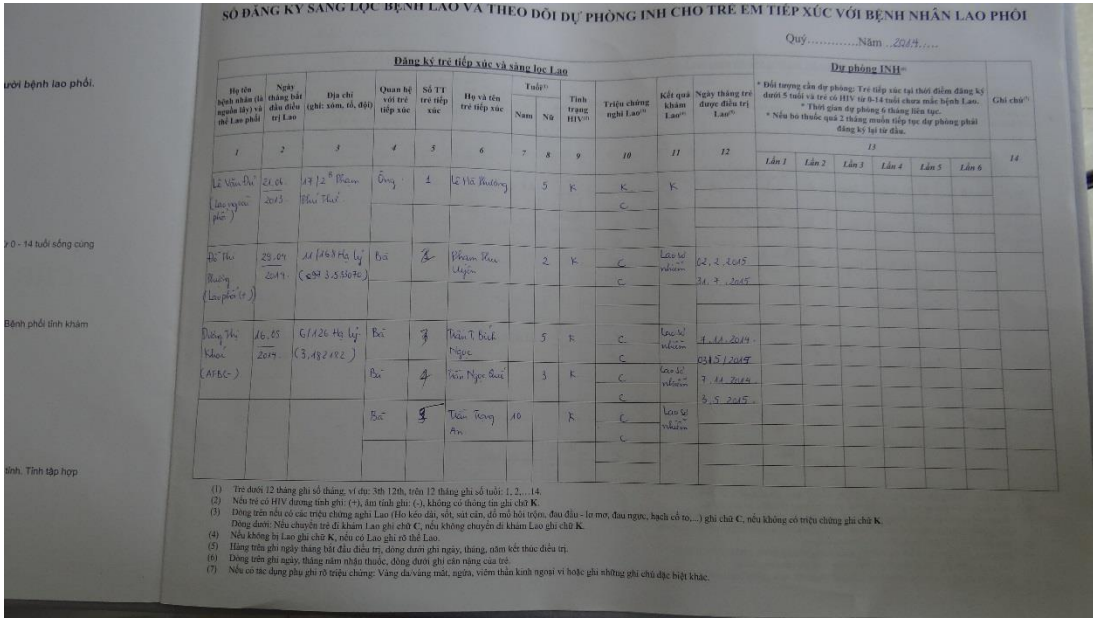
The Working plan for Childhood TB control in Vietnam 2015-2020 with objectives to strengthen:

1) advocacy, communication and social mobilization in childhood TB control;
2) early detection and treatment for childhood TB;
3) child TB contact management; and
4) monitoring and evaluation, and research.

Targets include:

- increase the proportion of child TB nationally to 6% in 2020;
- treatment success rate >90% from 2016; and
- at least 80% eligible child contacts receive IPT.





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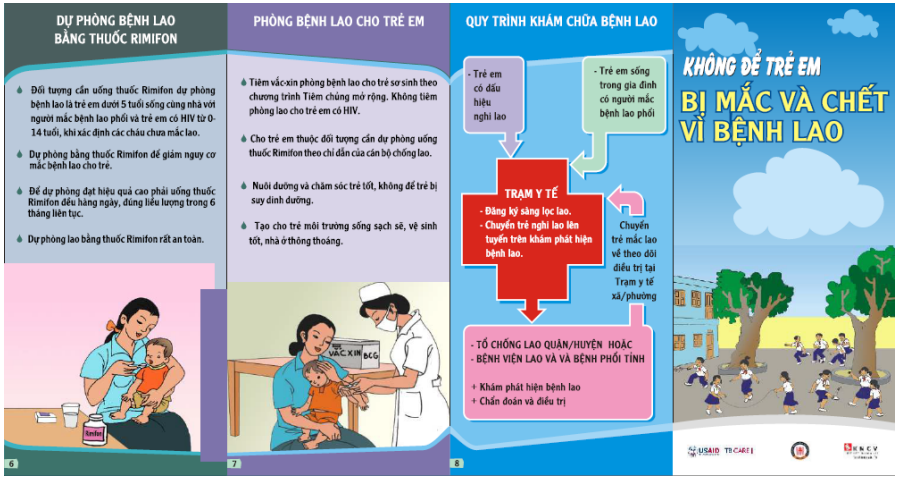
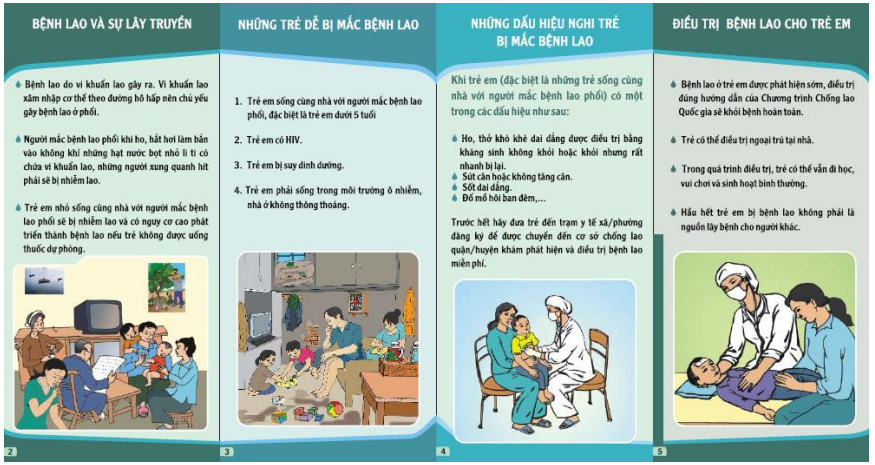
Community awareness – and support health worker!

12,750 posters





554,400 leaflets

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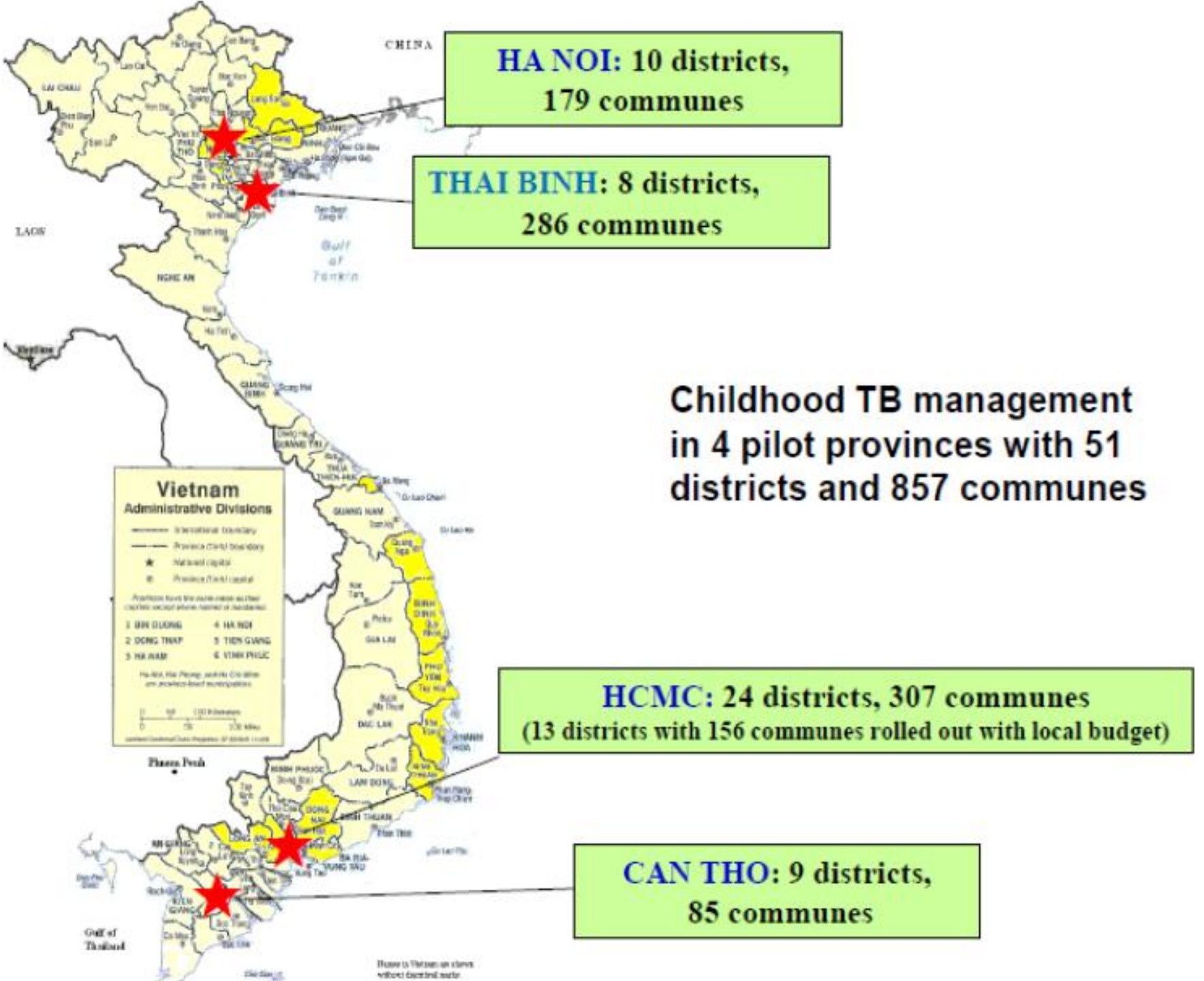
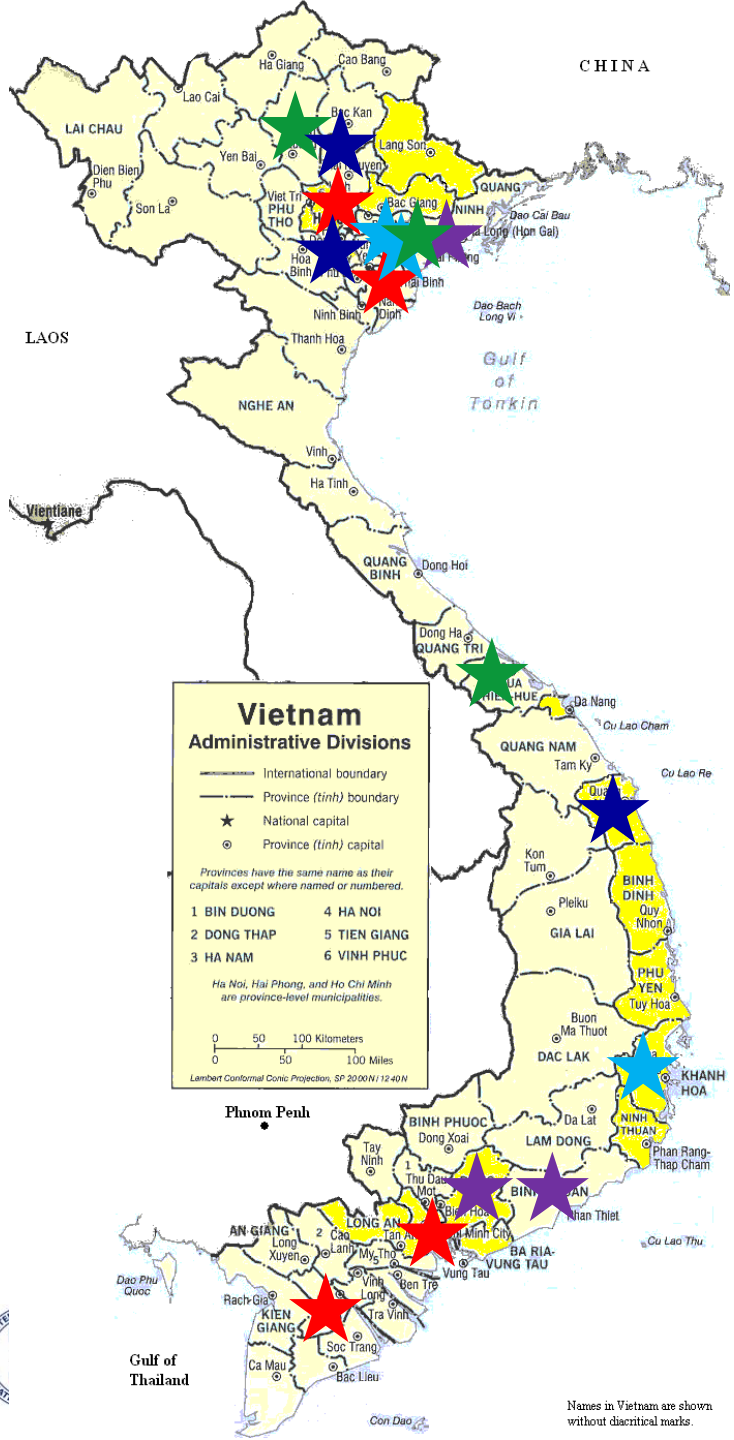

CHINA
LAOS
Gulf of Tonkin
Gulf of Thailand
Phnom Penh
Vietnam
Administrative Divisions
HA NOI: 10 districts, 179 communes
THAI BINH: 8 districts, 286 communes
Childhood TB management in 4 pilot provinces with 51 districts and 857 communes
HCMC: 24 districts, 307 communes
(13 districts with 156 communes rolled out with local budget)
CAN THO: 9 districts, 85 communes

Community contact screening in 4 pilot provinces in Q4/2012 – Q1/2016

	2012 Q4	2013	2014	2015	2016 Q1	Total
Child contacts screened	1,084	3,025	4,409	4,483	871	**13,872**
Child contacts eligible for IPT	339	1,238	1,800	1,849	362	**5,588 (40%)**
Numbers received IPT (% of eligible)	184 (46%)	764 (62%)	1,164 (65%)	1,568 (85%)	296 (82%)	**3,976 (71%)**
All child TB cases notified	57	288	286	290	79	**1,000**
Bacteriologically confirmed PTB	7 (12%)	30 (10%)	55 (19%)	29 (10%)	14 (18%)	**135 (13%)**
Clinically diagnosed PTB	27	130	134	130	45	**466 (47%)**
EPTB	23	128	97	131	20	**399 (40%)**

IPT completion in 4 pilot provinces Q4/2012 – Q1/2015

	2012 (Q4)	2013	2014	2015 (Q1)	Total
Children put on IPT	184	764	1,164	409	2,521
Children with IPT completion	153	633	1,016	379	2,211
% IPT completion	83.2	86.8	87.3	92.7	87.3 %



Scale up childhood TB management

★ **2012-2013: 4 pilot provinces**

★ **2013: 3 provinces (Nam dinh, Hung yen and Khanh hoa)**

★ **2014: 3 provinces (Hai phong, Dong nai, Binh thuan**

★ **2015: 3 provinces (Hai duong, Bac giang, Da nang)**

★ **2016: 3 provinces (Thai nguyen, Ninh binh, Quang nam)**

Scale up child contact screening and management : Q1/2015 countrywide (registers, INH and guidance available in all communes (10,732))

Preliminary results of community contact screening in 9 provinces in 2015-2016

	2015	2016 Q1	Total
Child contacts screened	5,195	905	6,100
Child contacts eligible for IPT	2,563	477	3,040 (50%)
Numbers received IPT (% of those eligible)	1,474 (58%)	303 (63%)	1,777 (59%)
All child TB cases notified	423	49	472
Bacteriologically confirmed PTB (% total child TB)	21	4	25 (5%)
Clinically diagnosed PTB	305	22	327 (70%)
EPTB	97	23	120 (25%)

IPT completion in 9 provinces 2014 – Q1/2015

	2014	2015 (Q1)	Total
Children put on IPT	881	223	1,104
Children with IPT completion	842	203	1,045
% IPT completion	95.6	91.0	94.7%

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Draft contact management guidelines

- Consistent with WHO and Viet Nam NTP guidelines
- Steps and algorithm for community-based screening
- Screening of contacts of all PTB cases
- Preventive therapy for contacts of drug-sensitive TB is 6H: no active TB and young child (<5 years) or PLHIV

- Individualised approach for young child contact of MDR TB, preventive therapy should include fluoroquinolone

The Union

International Union Against Tuberculosis and Lung Disease

Health solutions for the poor

Childhood TB Learning Portal

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Childhood TB for Healthcare Workers: an Online Course

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