

TB/HIV co-infection

Feedback from parallel session

TB/HIV in the region-

CHALLENGES

- TB/HIV **data**: scarce, poor and messy
- Stop “rocket-science”- use existing **strong HIV comm. NGOs into TB** programs (Moldova: One stop-shop)
- **WHO policy** framework in place but NOT “translated” at country level:
 - National TB/HIV body
 - interaction between HIV and TB Commissions
 - Improve communication and initiatives among community where programs are vertical
 - Provide VCT to TB patients, IPT to HIV, enroll in treatment
 - Enhance intensified finding
 - Ensure proper triage and hospitalization of TB/HIV patients
- GF **is still** the a major stakeholder in funding TB/HIV data collection and reporting systems
- **Move** from reporting initiatives in GFATM projects into regular National reporting frameworks

Barriers in TB/HIV clinical management

- **Continuous education and training:**
 - The clinicians are not experienced enough in management of TB/HIV co-infection
 - Enroll nurses, social workers, other staff
- **Treatment Protocols** - Patients are sometimes “victims” of national protocols and treatment algorithm “dead ends”
- **TB – HIV Interaction**-Clinicians need to interact, speak to each other
- **Data collection systems**-process data, share results, otherwise in vain

Practical Perspectives – Working Models

- **Romania** - No formal collaboration between TB and HIV programs; Management based on the “good will” of clinicians; TB/HIV not formally in the new Strategy
- **Serbia** – Establishment of National TB/HIV Group; Estimation of HIV prevalence among TB patients; Intensify case finding of TB among MARPs; Community approach-through “meal incentive program” in Roma slums

...other countries

- Incorporate MMT in the TB/HIV ward in Belarus
- Continuous education on TB/HIV management and development of treatment guidelines in Bosnia
- Joint protocol on TB/HIV in Kirgizstan
- TB/HIV management mandated by the Government in Bulgaria, inclusion of all relevant stakeholders

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- In Kosovo, although no notified cases, initiatives for intensified case finding of TB among HIV patients are undergoing
- Ukraine-public voices influence authorities, TB/HIV committee established in the MoH
- **Patient's perspective from Belarus: no information for co-infection, doctors interaction with patients is poor: the right to know!**

Key recommendations

- **Enable** TB/HIV working groups to assist/advise the CCM
- **Get feedback** from patients on the management “hick-ups”
- Operational Research – **“research & measure”** what you are doing to get better
- **Ensure** proper infection control
- **Ensure** national ownership of the TB/HIV management
- **Incorporate TB/HIV** into national policies and into the health system