

# Scale up of Tuberculosis Preventive Therapy (TPT) Uptake Amongst PLHIV The Kenya Experience

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#### **Presentation Outline**

- Country Capability Maturity Model TB/HIV Domain Staging
- Country policy guidance for TB Preventive Therapy
- TPT Implementation Model
- M&E, National TPT Coverage and Completion Trends
- Success factors for TPT scale up in Kenya
- Next Steps



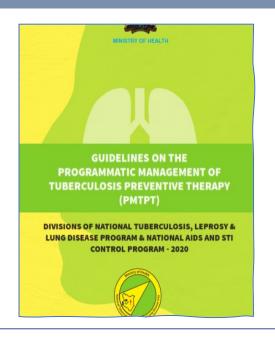
#### TPT in Kenya - CQUIN Capability Maturity Model Staging – TB/HIV Domain

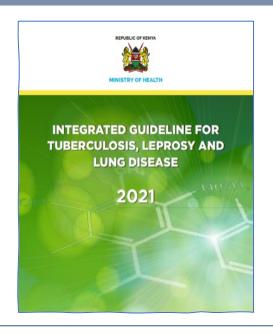


- Kenya guidelines has defined minimum package of TPT for PLHIV
- No current policy guidance for TPT for integration into less intense DSD models
- However, Kenya has successfully scaled up TPT amongst PLHIV
- Red: National HIV treatment guidelines do not define a minimum package of TPT services
- Orange: National HIV treatment guidelines define a minimum package for TPT, but TPT is not integrated within lessintensive differentiated treatment (DART) models
- Yellow: The national HIV treatment guidelines define a minimum package for TPT and TPT is integrated into lessintensive DART, and the country has data from the past year to describe TPT coverage amongst people enrolled in less-intensive DART. But TPT coverage among people enrolled in less-intensive DART is < 50%
- □ Light Green: In addition to meeting criteria for the yellow stage, TPT coverage amongst people enrolled in lessintensive DART is 50-75%
- Dark Green: In addition to meeting criteria for the light green stage, TPT coverage amongst people enrolled in lessintensive DART is > 75%



#### Kenya - Policy Guidance for Tuberculosis Preventive Treatment







- National TB and HIV Program Guidelines:
  - Provide guidance for eligible populations for TPT including PLHIV, TB contacts as well as populations at risk of TB infection
  - The Kenya integrated guidelines for Tuberculosis, Leprosy and Lung Disease 2021, provide additional guidance on DSD for screening, testing, treatment and care of TB

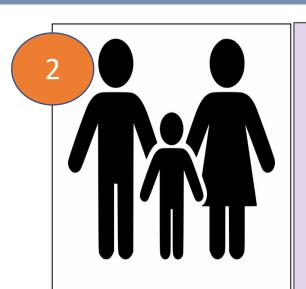


### Eligible Populations for TPT - Kenya

Per (P

People living with HIV (PLHIV):

Children aged ≥ 12 months, adolescents and adults



All household contacts of a bacteriologically confirmed PTB patients



Health care
workers and
other staff in
healthcare
settings



Prisoners and staff working in prison settings

Clinical risk groups

- Patients receiving immunosuppressantsPatients receiving dialysis
- Patients with silicosis

#### Kenya – Recommendations for TPT for PLHIV

3HP

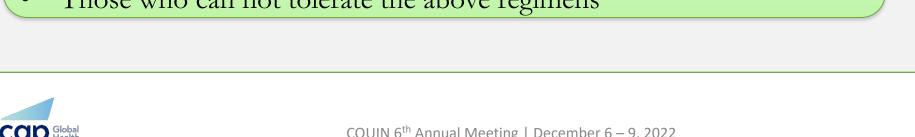
**6H** 

Rifapentine and Isoniazid (once a week for 3 months)

≥15 years adolescents and adults

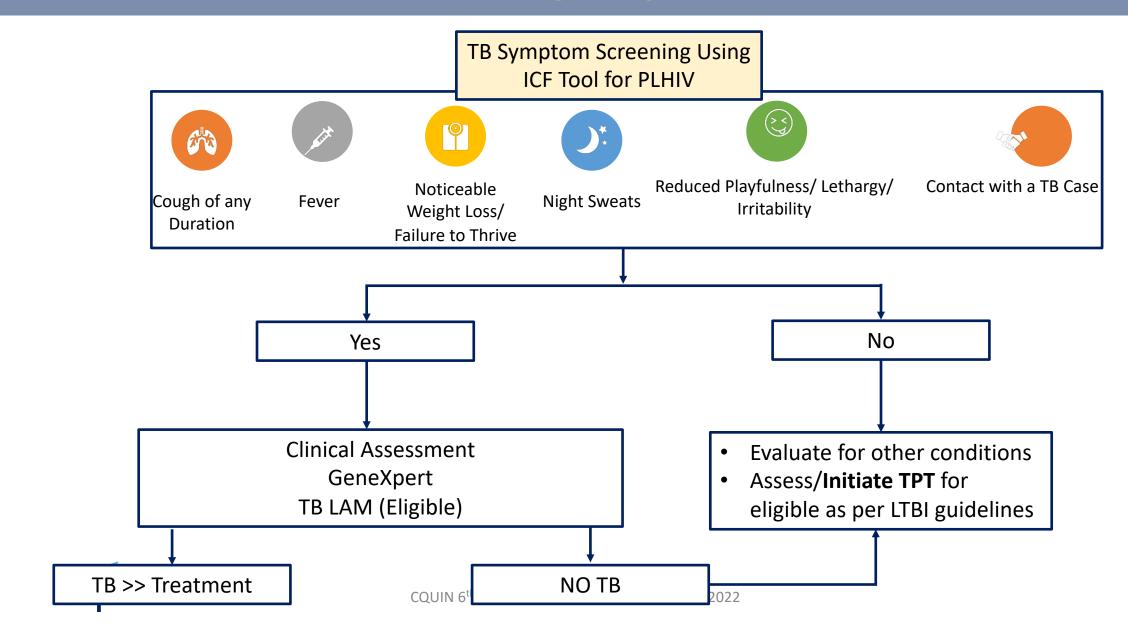
Isoniazid daily for 6 months to HIV

- Positive children and adolescents <15 years.
- Pg and BF women
- Those who can not tolerate the above regimens





### TB Screening/Eligibility for TPT



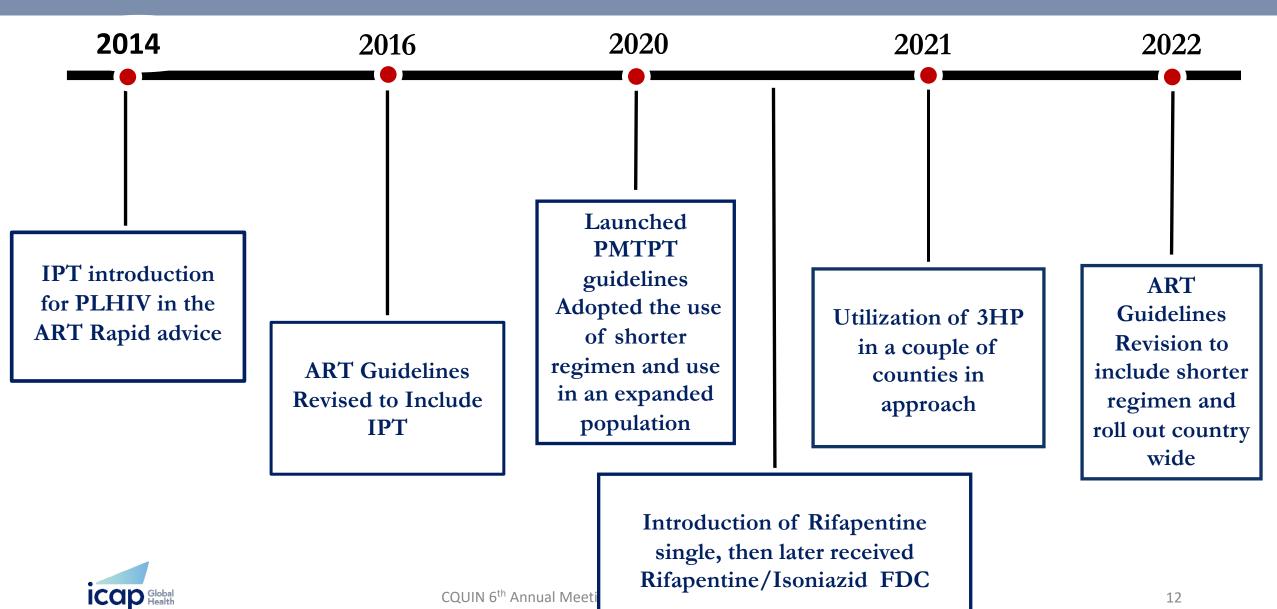
### Implementation Model for TPT in Kenya

	What	Who	Where	When
TB Screening	Symptom screening using ICF Tool	<ul><li>HCWs</li><li>Peer educator/Lay Workers</li></ul>	<ul><li>Facility</li><li>Community</li></ul>	At every visit
TPT Eligibility Assessment	Clinical assessment	• HCW	• Facility	At enrolment to care
TPT Initiation	Clinical Assessment	• HCW	• HCW	Same day initiation at ART start
TPT Follow Up	<ul> <li>TPT and other meds refills</li> <li>Symptom screening for active TB</li> <li>Assess and reinforce adherence to treatment</li> <li>Assess for any adverse drug reactions</li> </ul>	• HCW	• Facility	• Monthly

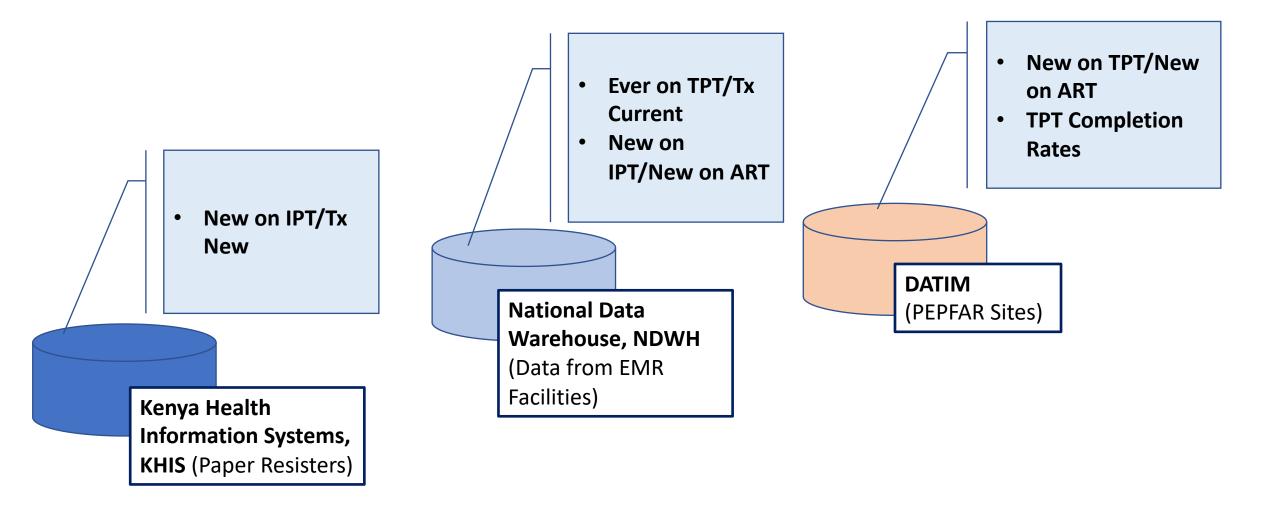
• Backlog of patients already in DSD models are allowed to stay on their current model for ART pick up but seen at facility for TPT initiation and follow up assessments (monthly)



#### Kenya TPT Journey

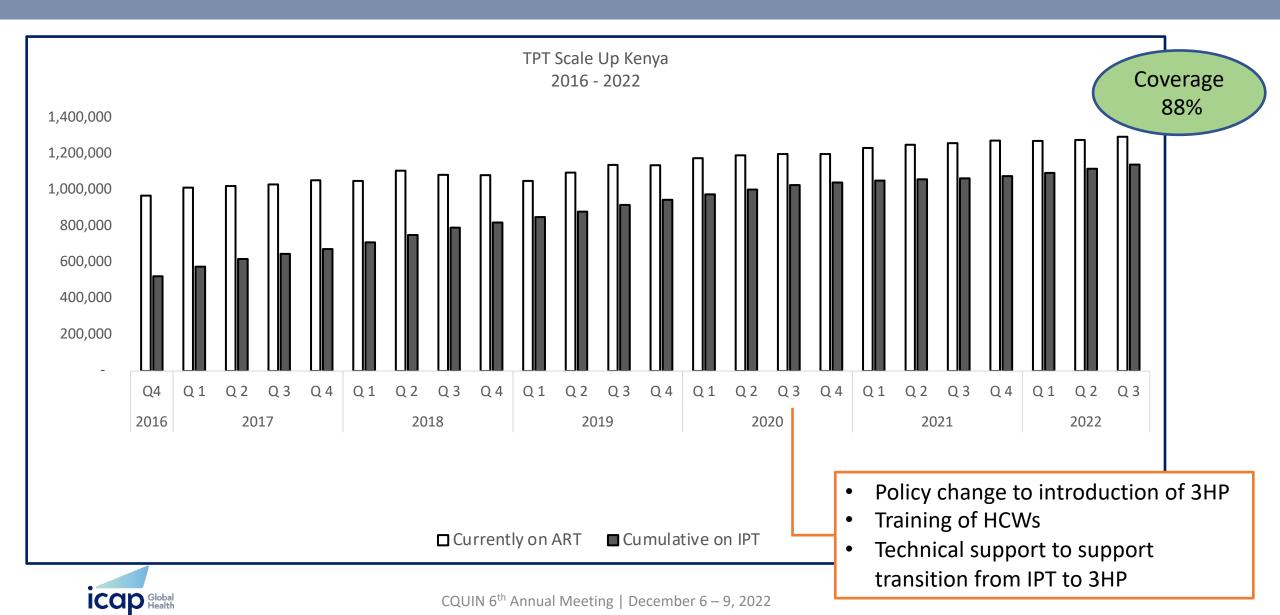


## M&E Systems for TPT - Kenya

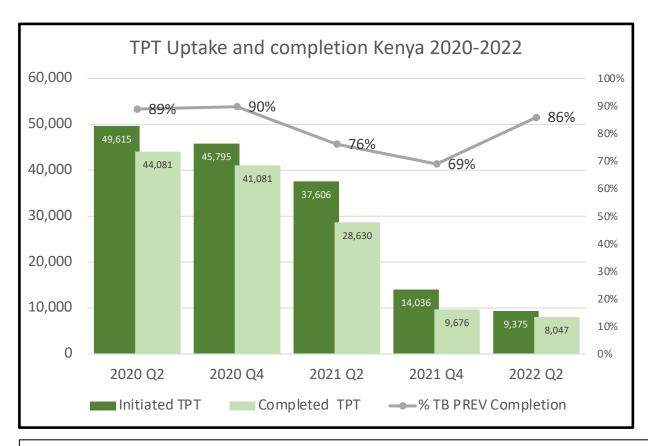


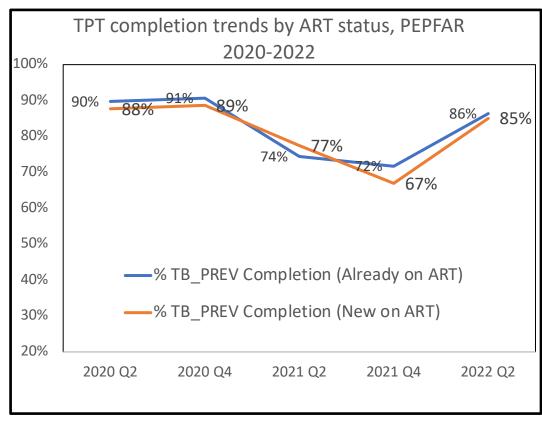


#### TPT Scale Up in Kenya



#### **TPT Completion Trends**



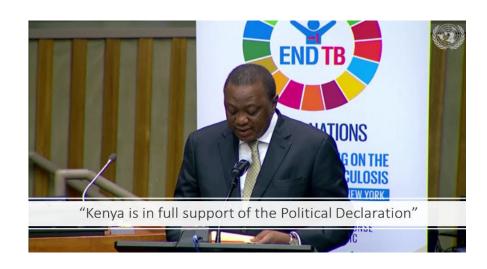


- Overall high TPT uptake and completion
- Decline in completion from 2021 related to global shortage of 3HP



Source: PEPFAR DATIM

### Success Factors for TPT Scale up in Kenya



Former President Uhuru Kenyatta re-affirms Kenya's commitment towards ending TB during 2018 UN General Assembly

- Strong leadership commitment to achieving TB and TPT targets
- Strong country policies
- Strong collaboration between the HIV (NASCOP) and TB (NLTP) programs
- Continuous stakeholder engagement including recipients of care
- Strong integrated supply chain systems
- South to South learning



## Next Steps for TPT/DSD



Uganda, Zimbabwe, and Zambia learning visit to Kenya on scale up of TPT

- Integration of TPT into less intense DSD models including for clients already on DSD models
- Enhance client monitoring/support including to improve TPT treatment completion
- Complete national transition from INH to 3HP



#### Acknowledgements















## Thank you!

