

This study aims to maximise TB and HIV case detection to provide earlier diagnosis and therefore reduce morbidity, mortality and transmission rates.

Background

Swaziland has the highest HIV prevalence in the world, estimated at 25.9% for adults aged 15-49. The region of Lubombo, in the east of the country, features the 2nd highest regional adult prevalence at 26%.

TB is another huge problem in Swaziland, and while the burden of TB infections is flattening or declining in neighbouring countries, in Swaziland it remains on an upward trend.

More than 83% of TB patients in Swaziland have HIV co-infection, making effective integration of co-ordinated TB screening and management with HIV care vital for the country's health services.

Early identification of people with TB and HIV can reduce morbidity and mortality associated with infection, and can reduce transmission within the population and families.

Objectives

- develop and establish a model for tracing, screening and testing of household contacts of TB patients
- develop and establish a model of HIV and TB screening for provider initiated services in general outpatient departments
- evaluate the effectiveness of these case finding models

Study outcomes

The study has 2 stages:

1. TB contact tracing, and scaling-up screening for TB and HIV in general hospital services. When patients are diagnosed with TB and have started treatment, they are asked to list their household contacts. These contacts are then invited to attend TB screening at the outpatient department.
2. scale-up provider initiated HIV testing and counselling and TB screening within general outpatient services. All patients who present to the out-patient department during the study will be invited to receive HIV testing and counselling, and HIV positive patients will routinely be screened for TB.



In-country partners:

- Good Shepherd Hospital
- Ministry of Health
- National TB Control Program

COMDIS-HSD themes:

- Accessible and user-friendly services
- Primary care
- Quality of care

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