



Developing a psycho-social support (PSS) intervention for people with multi-drug resistant tuberculosis (MDR-TB) and co-morbid depression in Bangladesh: a feasibility study

PROJECT BRIEF

The study aims to develop an acceptable and feasible PSS package which will be ready to embed within the existing National TB Control Programme (NTP) service delivery system.

Background

MDR-TB is a worldwide public health problem. According to the World Health Organization (WHO), in 2016 the number of estimated MDR-TB cases were 490,000 globally¹. The incidence rate of MDR-TB was 8.1% globally in the same year, with 4.1% of new cases estimated to have MDR-TB¹. The estimated incidence of MDR-TB is higher among previously treated cases, at 19%¹.

One clinical challenge to MDR-TB treatment is the long and unpleasant treatment with severe drug side-effects, frequently leading to psychiatric disorders. Whether as a consequence of side-effects or the challenges of living with MDR-TB, depression and anxiety are common among MDR-TB patients. Despite the correlations between mental health and MDR-TB treatment completion and outcomes, mental health is not currently addressed in MDR-TB programmes in many countries.

Though Bangladesh is one of WHO's 30 MDR-TB high burden countries, the prevalence of mental disorders and their impact on treatment for MDR-TB is not well documented. In a recent review of the community MDR-TB programmes, a chart review of 77 patients revealed only 5% of cases having documented psychiatric symptoms. However, when 60 of these patients were interviewed, 60% reported psychiatric disorders².

The existing health service delivery system does not include any screening for mental health problems among MDR-TB patients, or any psycho-social counselling for MDR-TB patients.

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Project setting

Mohakhali, Dhaka, Bangladesh

Project timescale

January 2017 - December 2018

Partners

- Ministry of Health and Family Welfare, Bangladesh
- National TB Control Programme
- COMDIS-HSD
- Department for International Development, UK



Aims

We aim to develop an acceptable and feasible PSS package to embed within the existing NTP health service delivery system. Specifically, we will:

- assess the existing MDR-TB services, exploring the facilitators and barriers in the current service provision for mental health support;
- assess the prevalence of depression among MDR-TB patients using the PHQ-9;
- validate PHQ-9 in the Bangladesh context;
- identify whether depression is associated with cure rate; and
- develop tools, materials and guidelines for a PSS package that is applicable to the Bangladesh MDR-TB programme context.

Study design and methods

We will use mixed-methods for data collection. The study will be carried out at hospitals across 2 health facilities in Bangladesh that provide MDR-TB care. The target population are patients in their first phase of treatment (normally 4-8 weeks) where they are hospitalised. We will select facilities from both rural and urban areas in consultation with the NTP.

An initial meeting was arranged with Nepal and Pakistan teams to gather their experience and get a better understanding of the PSS package, modality of delivering the service package, any challenges and other lessons learned. This will help to adapt the package for the Bangladesh context.

For more information, please contact:

Dr. Rumana Huque at:

rumana@arkfoundationbd.org

E-mail: info@arkfoundationbd.org

ARK Foundation, Bangladesh

House 130B, Road 21, New DOHS, Mohakhali,
Dhaka-1206, Bangladesh
Phone: +88 02 9880363

Phase 1: Explore the current MDR-TB service provision mechanism in 2 centres.

Phase 2 - Developing the PSS package: Adapt the intervention elements (e.g. peer support groups, telephone support and contributions from expert patients) and associated materials developed in Nepal and Pakistan, and translate them into Bengali. These include flipbooks and leaflets for patients, and leaflets for family members.

Phase 3 - Finalising materials: Consult with stakeholders and finalise the PSS package to use for counselling MDR-TB patients in hospitals.

Sharing our research evidence

We will share our findings with our key stakeholders, including national TB programme policy makers and clinicians, the National Institute of Mental Health, NGO's delivering TB services, local TB advocacy organisations, local mental health advocacy organisations, local media, other research NGO's, carers and patients. We will also:

- communicate the findings of the study at a publicity event at the end of the study with key local stakeholders invited; and
- share our findings at national, regional and international conferences, and via social media.

References

1. World Health Organization. (2017) [Global tuberculosis report 2017](#). Geneva, WHO
2. Cavanaugh, J.S, Kurbatova, E, Alami, N.N, et al. (2016) Evaluation of community-based treatment for drug-resistant tuberculosis in Bangladesh. *Tropical Medicine & International Health* 21(1):131-139. doi.org/10.1111/tmi.12625



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This project has been funded by UK aid from the UK government. However, the views expressed do not necessarily reflect the UK government's official policies