CENTER FOR GLOBAL HEALTH, DIVISION OF GLOBAL HIV AND TUBERCULOSIS

TUBERCULOSIS PREVENTIVE TREATMENT IN NEW VS EXISTING ANTIRETROVIRAL THERAPY PATIENTS

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BACKGROUND

- The World Health Organization (WHO) recommends tuberculosis preventive treatment (TPT) for all people living with HIV (PLHIV) without contraindications or symptoms of tuberculosis
- The U.S. President's Emergency Plan for AIDS Relief (PEPFAR) is committed to providing TPT to the eligible 14 million PLHIV supported by the program
- PEPFAR has been reporting semi-annual data on TPT among new and existing antiretroviral therapy (ART) patients since 2017
  - TPT initiation and completion data for a cohort are reported together, at the time of presumed completion (6 months after TPT initiation)

METHODS

- We conducted a descriptive analysis of TPT completions among ART patients across PEPFAR countries from October 2017-October 2019
  - Disaggregated results by patients newly initiating ART vs already receiving ART (≥ 6 months) at time of TPT initiation
- Countries reporting this disaggregated data for >90% of TPT initiations were retained for analysis
- Examined the proportion of ART patients who screened negative for TB symptoms and were initiated on TPT

RESULTS

- 19/29 (66%) PEPFAR-supported countries retained for analysis
- Number of PLHIV eligible for TPT based on negative TB symptom screen ranged from 555—981,037 per country

In the most recent reporting period:

- Among eligible patients newly initiating ART, 46% were initiated on TPT, and 26% completed TPT
- Among eligible patients already receiving ART, 8% were initiated on TPT and 7% completed TPT

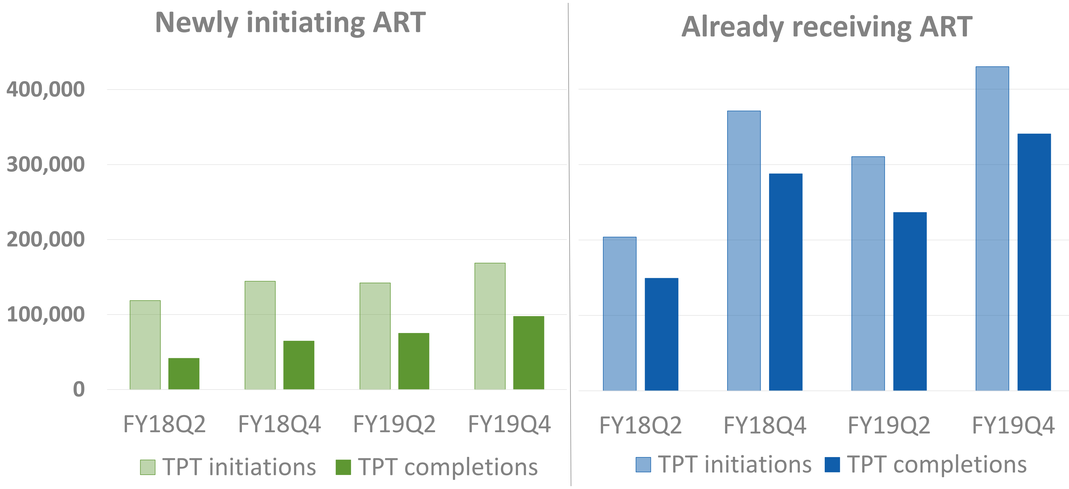
Since October 2017:

- TPT completions among new ART patients increased from 41,542 in 2017 to 97,579 in 2019 (**Figure 1**)
- TPT completions among existing ART patients increased from 149,184 in 2017 to 340,607 in 2019 (**Figure 1**)
- Since 2017, TPT performance improved, specifically:
  - TPT completion among all ART patients initiated in the previous reporting period increased from 59% to 73%; increase mostly in those *newly initiating* ART (**Figure 2**)
  - TPT initiation among eligible ART patients increased among those newly initiating ART from 20% to 26% (**Figure 3**)

TPT completion is consistently lower in those *newly initiating* ART than in those who were *already receiving* ART at the time of TPT initiation.

TPT completion and initiation across PEPFAR-supported sites has dramatically increased over the last two years.

Figure 1: TPT initiations and completions among new/existing ART patients



CONCLUSIONS

- Number of TPT completions has more than doubled since 2017
- TPT completion rate among those newly initiating ART was lower than those who were already receiving ART for at least 6 months at the time of TPT initiation (21% lower in most recent data)
- TPT initiation among ART patients screening negative for TB symptoms is very low
  - Higher for those newly initiating ART than for those already receiving ART (26% vs 7%)
- Efforts to increase TPT completion among patients newly initiating ART and TPT coverage among existing ART patients is needed

Figure 2: TPT completion rates over time

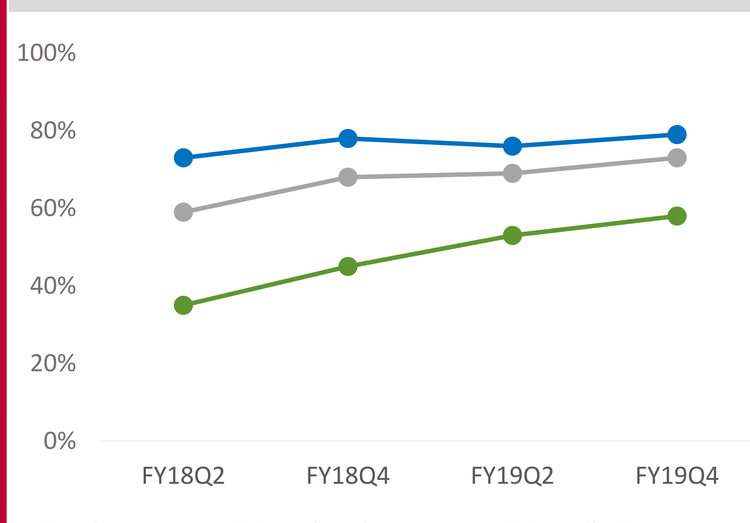
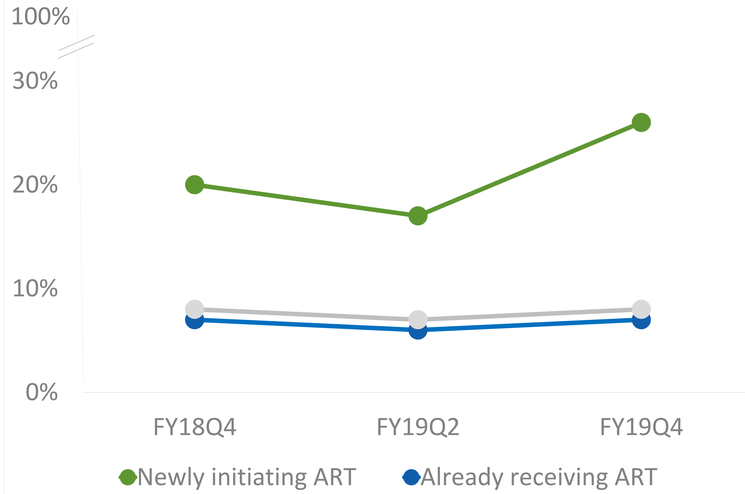


Figure 3: TPT coverage among eligible ART patients over time*



*Patients were assumed eligible for TPT if no TB symptoms were present; additional criteria may contribute to ineligibility, such as previous completion of a course of TPT or contraindications. Because of this, the number of eligible patients may be over-estimated in some instances.

PEPFAR reporting cycles for semi-annual indicators: FY18Q2= Oct 2017 – Mar 2018, FY18Q4=Apr 2018 – Sept 2018, FY19Q2=Oct 2018– Mar 2019, FY19Q4=Apr 2019– Sept 2019

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