

Supporting TB treatment & control @ St Francis' Hospital, Katete, Zambia



Project Update Report 2023/24

Background

With an estimated tuberculosis (TB) incidence of 319 cases per 100,000 population, Zambia is among the top 30 high burden TB countries globally. However, the findings from Zambia's first countrywide TB programme Data Quality Assessment demonstrate substantial under-notification and under-reporting of TB cases across all provinces. Countrywide, the level of under-notifications of TB patients at health facilities and underreporting of notified TB cases to the national level was found to be 33% and 11%, respectivelyⁱ. The National Strategic Plan for Tuberculosis Prevention, Care and Control draws from the Global Stop TB Strategyⁱⁱ. It pays tribute to faith-based hospitals such as St Francis in the fight against TB due to most of these health institutions being located in rural and hard to reach areas of Zambia serving the poor and the underserved. Faith-based health facilities also attend to patients from outside of their own catchment areas, districts and provinces. This is certainly true of St Francis. There is also specific mention of the value of cooperating partners, such as the Logie Legacy, who support programmes to mitigate diseases of public health concern.

The Zambian National Health Strategic Plan identifies several key challenges for the TB programmeⁱⁱⁱ. These include sub-optimal multi-disciplinary involvement in TB management; Low coverage of drug susceptibility testing to inform management of patients especially in cases of drug resistance; 3-4% of TB patients do not know their HIV status. The government identifies 4 key objectives each backed by strategic interventions. There is a focus on scaling up intensified TB case finding, TB-HIV collaborative services, and building the structure for implementing Programmatic Management of Drug-Resistant Tuberculosis. A major collaborative effort is needed if the goal is to be reached of ending the TB epidemic by 2035.

The Logie Legacy has supported the work of the TB programme at St Francis Hospital since 2012. This is entirely in line with several of the interventions mentioned above. This includes the purchase of 46 bikes, bike maintenance workshops and clothing to assist the volunteers in their efforts to visit more patients, contacts and communities. Their volume of work is high. For example, in the 4th quarter of 2022 out of the 9,811 patients attending the Out-patient department 512 were TB presumptive cases. All contacts of bacteriologically confirmed TB cases are offered screening. Attendance of these contacts at the chest clinic is encouraged by the volunteers during the community visits by offering to reimburse their transport costs. For example, during the week of 10th October 2022 a total of 87 contacts were screened out of 16 index cases who were pulmonary bacteriologically confirmed TB cases of which 48 provided sputum samples. Amongst the 48, twelve were given X-rays. Two known HIV clients were clinically initiated on anti-TB drugs.

This update should be read in conjunction with the 2021 TB project evaluation report^{iv} and the 2022 Update.

2023 Project support

- New Chairperson Dr Niall Campbell and Chris Faldon, Trustee visited the project
- Additional funding during 2023 totalling £3207 was allocated
- 4th round of maintenance workshops was held over 3 days in Aug and 25 bikes were repaired
- Ten new bikes and backpacks were provided for new local volunteers
- Each volunteer received a new Logie Legacy tee shirt
- A refurbished laptop was provided to the TB team to help in their administration

Next steps

This project has been well received and offers real assistance to the work of the TB programme at the hospital. From the outset it was stated that the responsibility for cycle maintenance should fall to the volunteer and as many have low income, they cannot fulfil this obligation. We need to revisit the sustainable

development assumption and decide on the appropriateness of continuing financial support without a defined exit strategy.

Many patients need support in more remote and distant locations from the hospital and the bikes are not a practical solution in these circumstances. It has been suggested that a motorbike could help to address this. Not every TB patient was connected to a treatment supporter and the reasons for this should be explored to see if this can be reduced. In a larger study involving several TB treatment centres (including St Francis Hospital) 43% of TB patients were connected to a treatment supporter^v. The main support received under DOTS included: Adherence support, collection of drugs, spiritual (through home visitations), and general health talks.

It has been challenging to get regular reports from the clinicians responsible for the TB service. Discussion is needed with hospital management about achieving longer term objectives. The more evidence we can gather on the effectiveness of this project will help to prioritise future spending plans. Basic information such as geographical coverage and volunteer activity will go a long way to plug this gap. Some cases studies will help to paint a clearer picture of the challenges, obstacles and successes. The team is extremely dedicated to their work and that 25 of the original 36 bikes after 10+ years in constant use is remarkable. This relatively simple and low-cost intervention is anecdotally making a big impact. There is more to achieve and celebrate.

Appendix: Repair workshop and new bike distribution



10 new bikes awaiting collection



Distribution day!



Each bike is named and given to a specific volunteer to use and look after



Niall will fix it?



Best leave it to Tiki!



Impossible task?



Miracles happen!

Sources and further reading

ⁱ Undernotification and underreporting of tuberculosis in Zambia: a national data quality assessment <https://bmchealthservres.biomedcentral.com/articles/10.1186/s12913-022-08431-2>

ⁱⁱ National Strategic Plan for Tuberculosis Prevention, Care and Control (2017-2021) "Towards Elimination" <https://platform.who.int/docs/default-source/mca-documents/policy-documents/plan-strategy/ZMB-CH-43-01-PLAN-STRATEGY-2018-eng-TB-Zambia-National-TB-Strategic-Plan-2017-2021.pdf>

ⁱⁱⁱ Zambia National Health Strategy Plan 2022-2026 <https://www.moh.gov.zm/wp-content/uploads/2023/02/National-Health-Strategic-Plan-for-Zambia-2022-to-2026-revised-February-2023-lower-resolution.pdf>

^{iv} 'On Yer Bike' The Logie Legacy. Supporting TB treatment & control at SFH <https://www.logielegacy.com/tb-control>

^v USAID https://tbcare2.org/wp-content/uploads/2018/03/TB-CARE-II-Adherence-report_Zambia.pdf

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