

**Track:** E - Implementation Science, Health Systems and Economics

**Category Number:** E1 - Integrating HIV inpatient and outpatient services, HIV-TB, HIV-STI, non-communicable disorders and other relevant diseases

**Title: Monitoring TB in childhood and early adolescence in ART Clinics: The Elizabeth Glaser Pediatric AIDS Foundation's experience in supporting the Tanzania Ministry of Health and Social Welfare**

**Authors:** KASSONE<sup>1</sup>, Stella Dennis; AGBO<sup>2</sup>, Serge (sagbo@pedaids.org); TARIMO<sup>3</sup>, Alan; SELINA<sup>1</sup>, Mathias; MSOFFE<sup>1</sup>, Yuda; KIMARIO<sup>1</sup>, Chrispine.

**Affiliations:** 1: Elizabeth Glaser Pediatric AIDS Foundation (EGPAF), Tanzania; 2: Elizabeth Glaser Pediatric AIDS Foundation (EGPAF), USA; <sup>3</sup>National Tuberculosis and Leprosy program, Tanzania

**Background**

It has been difficult at the international level to determine how programs are performing in intensified TB case-finding (ICF), particularly in children. In Tanzania, one of the 22 highest TB-HIV burden countries, the Elizabeth Glaser Pediatric AIDS Foundation (EGPAF) has operated a CDC-funded project in five regions of Tanzania, supporting the initiation of >7,600 HIV-positive children on antiretroviral therapy (ART) since 2006. EGPAF has an integrated TB/HIV component that includes district and facility-level mentorship, supervision, and training focused on diagnosis of pulmonary TB and clinical management of TB/HIV co-infection in children <14 years. We examine performance in TB case detection in HIV-positive children and provide crude numbers of incident TB cases in HIV-positive children.

**Methods**

Compiled patient level data from April 2010 to September 2011 was examined from 165 facilities supported by EGPAF in Tanzania.

**Results**

383,002 consultations were held in ART clinics: 34,374 (9.0%) involved children <14 years, and among all patients screened for TB, 8.6% (26,033) were children. Symptom screening was performed on an average 75.7% of children in care each quarter. The children presenting TB symptoms (2075) represented 18% of overall symptomatic cases and found in 8% of children screened for TB. Among children with suspected TB, 397 (19%) incident TB cases were reported representing 12% of all confirmed cases.

**Conclusions**

Despite known challenges of TB diagnosis in children and poor access to diagnosis services, our use of aggregate patient data showed the success of Intensified Case Finding in children and early adolescents on care ART clinics. ICF enabled early case detection of nearly 400 TB/HIV co-infected cases. Although challenges still remain on access to diagnosis and capture of accurate information co-infection in children, ICF efforts are an important intervention to improve TB/HIV case detection and treatment of children in Tanzania.