

# **Patients and TB: Improving treatment outcomes through a patient centred approach and access to new treatments**

**5<sup>th</sup> TB Symposium – Eastern Europe and Central Asia  
Ministry of Labour, Health and Social Affairs of Georgia  
and Médecins Sans Frontières**

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## **Outpatient Delivery of Care Substituting for Inpatient Treatment of TB Patients in Kazakhstan**

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**MINISTRY OF LABOUR,  
HEALTH AND SOCIAL  
AFFAIRS OF GEORGIA**

**Decree # 362 of the Ministry of Health & Social  
Development  
of 29.12.2014 r. "On some issues of expanded outpatient  
treatment of TB and MDR TB patients accompanied with  
psychosocial support in a pilot project"**

**Project implementation in 5 regions:**

- **Akmolinsk region**
- **Aktubinsk region**
- **Zhambyl region**
- **Kyzylorda region**
- **City of Astana**

# Key Project Performance Indicators

*Proportion of TB and MDR TB patients including:*

Patients having started and continuing treatment in outpatient settings

Lost to follow-up

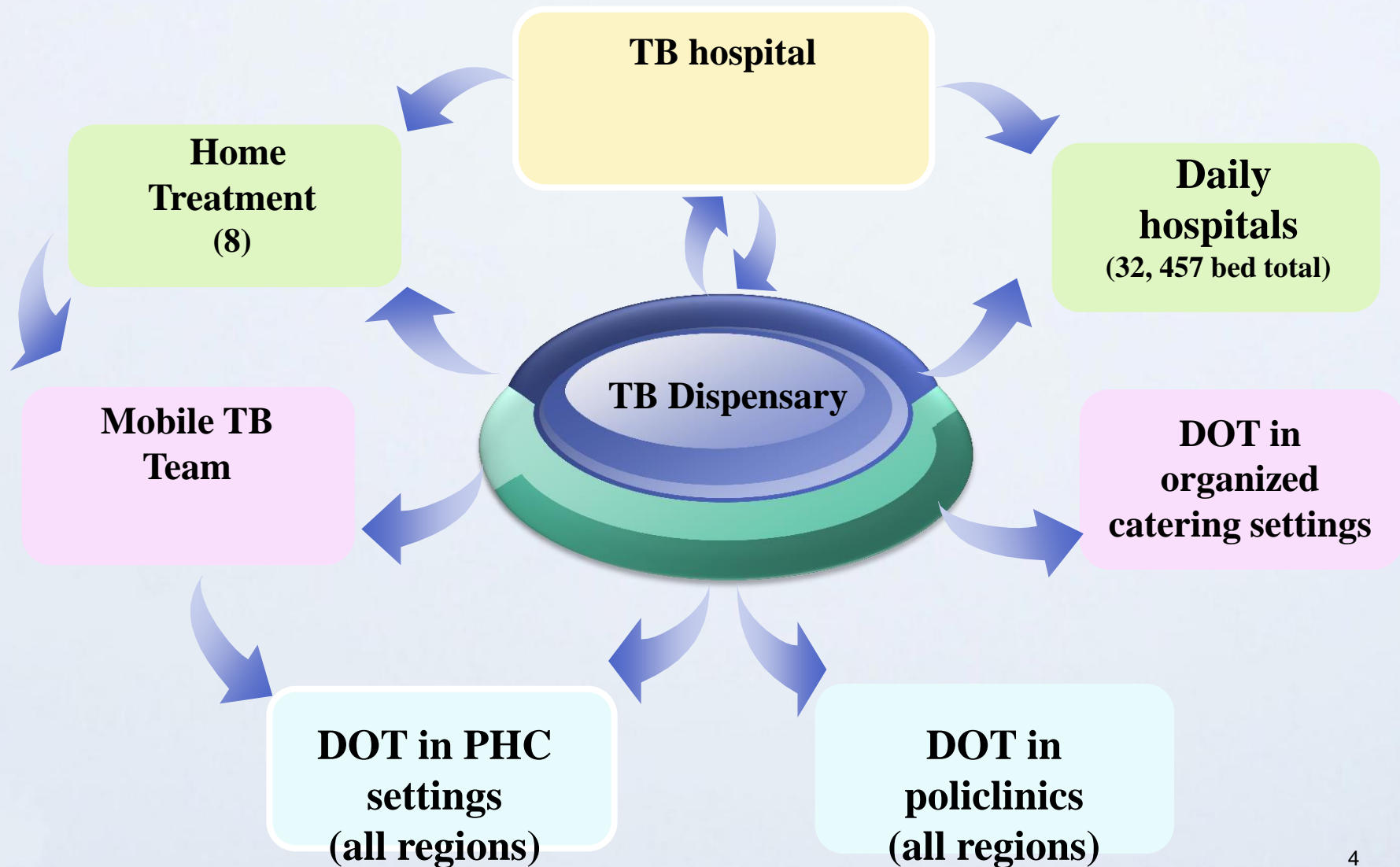
Cured cases of first-diagnosed pulmonary smear-positive TB

Cured cases of MDR TB

Regularly receiving social support at the outpatient treatment stage



# Substitution of Inpatient Treatment



# **Objectives of the Central Medical Commission (CMC)**

- **Decide on administration of outpatient treatment**
  - **Daily hospital**
  - **Home treatment**
  - **Mobile team from a polyclinic**
  - **DOT points in PHC**
  - **DOT points in polyclinics**
- **Identify type and mechanism for provision of social and psychological support to TB patients**
- **Decide on the scope of necessary social assistance, its frequency and terms**

# Patients in need of 24-hour medical monitoring

## Home treatment

- Severe co-morbidities
- Need to be accompanied to DOT
- Temporary restricted mobility : elderly, pregnant women, breastfeeding, disabled;
- HIV/AIDS

## Daily hospital

- Adherent to continuous treatment regimen
- Additional nutrition required
- Additional treatment required

## Organized catering settings

- Food distribution stations
  - Flophouses
  - Shelters
  - Cafeteria
- persons with lost social contacts
- homeless

# Organizing Treatment at Home

Treatment provided by a dedicated doctor of the TB dispensary

Services provided by nurses daily, except for Sunday (DOT 6 times a week)

A vehicle and a driver to be provided for medical staff

PHC doctor to visit the patient one a month, and adequate medical specialists from the PHC setting to provide advice and treatment depending on indications

The number of patients receiving treatment at home should be limited to no more than 15–20 patients (max. 25 patients)

Patients receiving treatment at home are not eligible for daily social support, yet they may be eligible for another kind of social support (one-time support)

Psychological support shall be provided to the patients on the as-needed basis

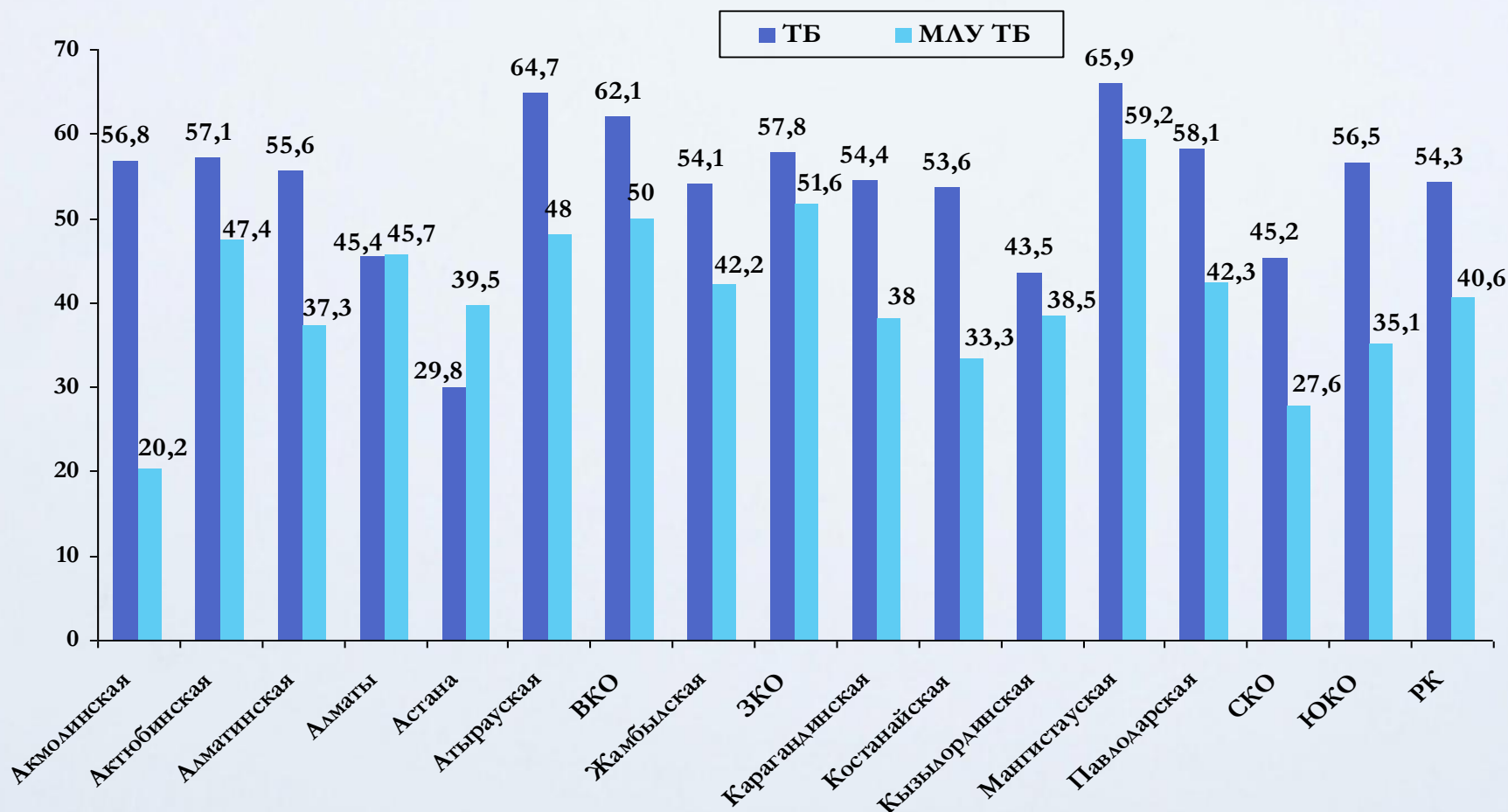
Social worker's support shall be provided to the patients on the as-needed basis

## **Funding**

- Outpatient treatment is funded from the approved budget of the polyclinic that organizes the treatment
- Head of the polyclinic shall identify the number of beds in the 'daily' hospitals in collaboration with the local healthcare management body
- The funding allocated for social support to TB patients on outpatient treatment shall be at least 4% of the total amount of funding allocated for TB control measures



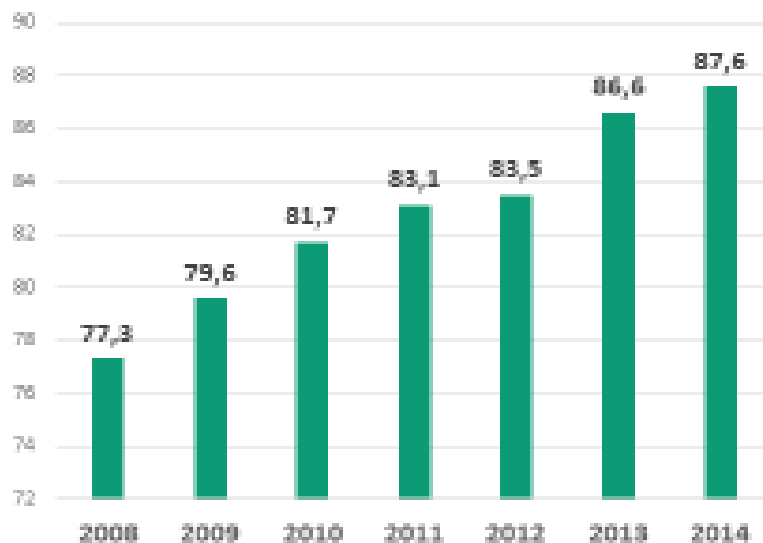
# Proportion of TB and MDR TB patients, smear-negative, 2015



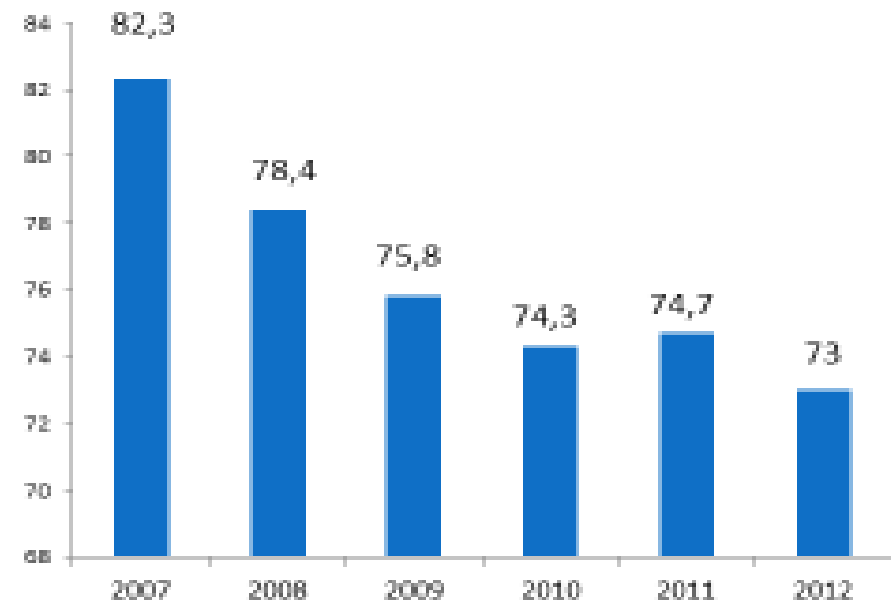
- 17% of MDR TB patients start treatment in outpatient settings

# Treatment Success in TB and MDR TB patients

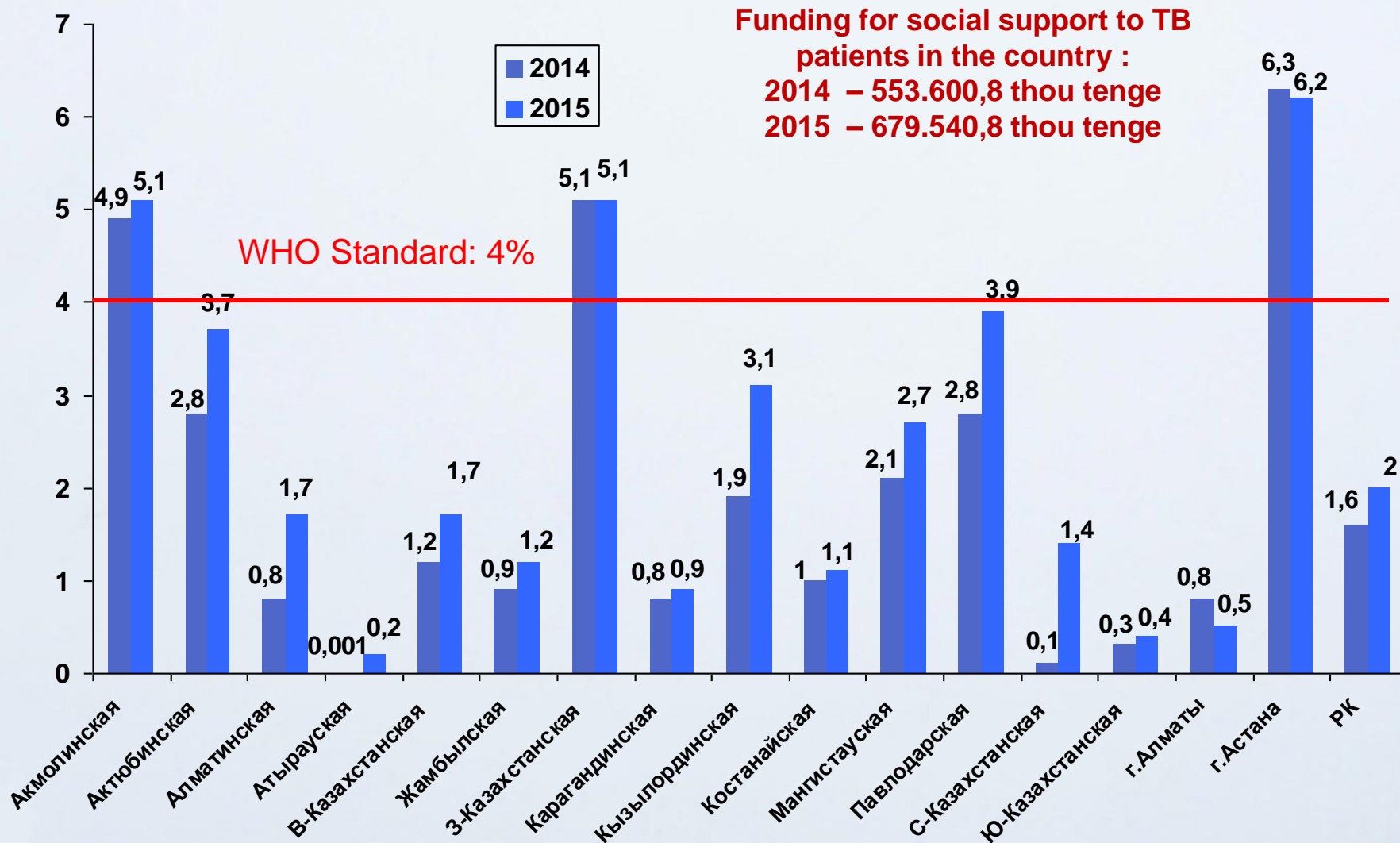
Эффективность лечения впервые выявленных случаев легочного ТБ с МТ(+) (когорты 2008-2014 гг.)



Эффективность лечения МЛУ ТБ (когорты 2007-2012 гг.)



# Proportion of Funding for Social Support to TB Patients (%)



# Conclusions

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**Decisions on the type of treatment (inpatient or outpatient) should be made individually on the case-by-case basis, and adapted to the patient's needs : fosters effective treatment**

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**Outpatient treatment, also in the intensive phase, is more comfortable for patients**

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**Proper organization of outpatient treatment and provision of psycho-social support promote adherence to DOT treatment in TB and MDR Tb patients, which in its turn results in high treatment success**

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Thank you for your attention!