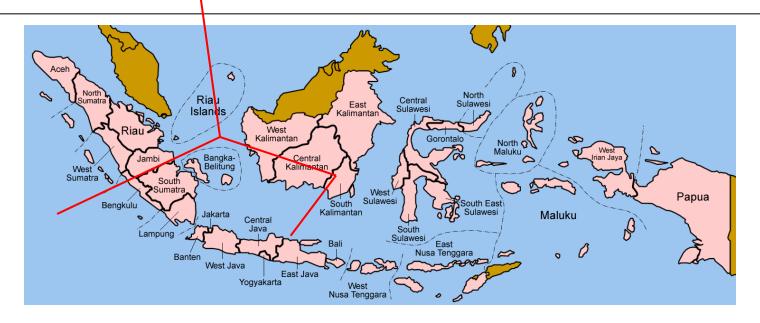
Management of Latent TB infection in Indonesia

Indonesia Country Profile



- Prevalence : 1,600,000 (647/100,000)
- Incidence : 1,000,000 (399/100,000)
- Incidence HIV/TB : 63,000 (25/100,000)
- Mortality : 100,000 (41/100,000)
- Total cases notified in 2014 : 324,539
- Total child TB cases notified in 2014 : 23,176
- National HIV prevalence among people aged 15 to 49 yo : 0.41%

High Risk Group and National Recommendations for LTBI Treatment in Indonesia

Target populations for LTBI activities

| Recommendation | High burden | Low burden |
|----------------|--|--|
| Strong | PLHIV Contacts (children) | PLHIV Contacts (adult and children) Patients initiating anti-TNF treatment Patients receiving dialysis Patients preparing for transplantation Patients with silicosis |
| Conditional | | Prisoners Health workers Immigrants from HBC Homeless persons Illicit drug user |

Treatment of Latent TB infection in Indonesia focused on :

- 1. People living with HIV Aids
- 2. Children under 5 years old

(National TB guideline 2015, TB National strategic plan 2016-2019)

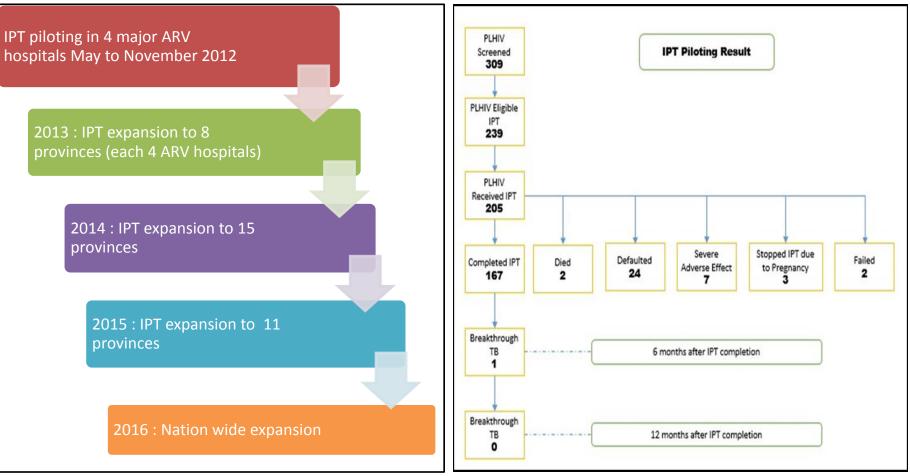
TB High risk group population

| Sub-population | Populat ion size estimate | Source of estimate |
|---|---------------------------------|----------------------------------|
| PLHIV | 708,000 | NAP (2014)* |
| Contacts to bacteriologically positive pulmonary TB | 2,795,000 | Estimates based on NSP 2013 |
| People > 55 years of age | 31,310,000 | BPS 2014 |
| Urban poor | 10,500,000 | BPS 2014 |
| Prisoners, including pre- trial detainees | 167,000 | Ditjen Pas (2014) |
| Malnourished children under five | 4.645.2000 | BPS (2014) |
| Pregnant women | 5,298,315 | Ditjen Bina Gizi & KIA (2013) |
| Diabetes | 9,116,000 | IDF (2014) |

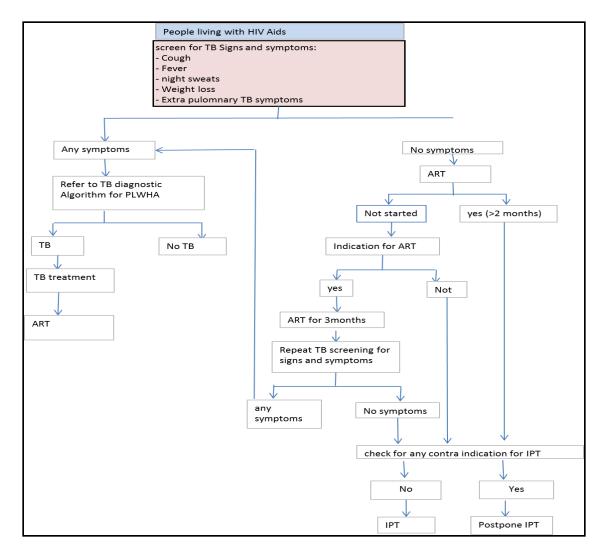
IPT for PLWHA

Steps of IPT for PLWHA implementation in Indonesia

Early implementation of IPT in Indonesia



Algorithmic Approach to Diagnosis and Treatment LTBI for People Living with HIV AIDS



- All PLWHA coming to ARV clinic will be screen for sign and symptoms of TB
- Those with symptoms will do sputum examination using Xpert
- If TB is confirmed patient will be treated for TB treatment
- And if TB is not confirmed patient will receive INH 300 mg and B
 6 25 mg for 6 month duration daily
- In 2015 we have enrolled 610 PLWHA on IPT

Reporting & Recording form IPT for PLWHA

- web based format to record IPT (IPTIS) is used for early implementation in 4 selected hospitals
- Now IPT RR system is integrated in SIHA (HIV Aids Information system)

| IPTIS Client v1.2 Input Data Report Help Sy Form IPT-1 | |
|--|---|
| Form PPT-3 FORMULIR PENILAIAN KRITERIA PASIEN UNTUK PEMBERIAN IPT Ionbah Ionbah | Rest Selamat Datang, admin Provinces Point Server Visur Main Server Selamat Datang, admin Profile Pilh UPK: User User Main Segment Silakan Pilih IUPK: User Ubload Upload Tabel IPT-4 Tabel IPT-4 Tabel IPT-4 Tabel IPT-4 Tabel IPT-4 Tabel IPT-4 Tabel IPT-4 Tabel IPT-4 Tabel IPT-7 Tabel IPT-6 |
| 3. Informasi terkait NAPZA 3.3 Sedang dalam terapi substitusi metadon 3.2 Pengguna NAPZA lainnya 3.4 Sedang dalam terapi substitusi subuleks Tanggal 19/01/2012 	Pemeriksa | Lonout Copyright © 2012, FHI360. All rights reserved. Powere |

Reporting & Recording form IPT for PLWHA

(2) 12 13 16 17 18 Substitusi dgn ARV lini ke-1 Switch dengan ARV lini k Pemberian ma Jumlah CD4 (% utk PP INH Pa uan Jumlah Viral Load Saat Mulai ART anak dan ibu hamil) RТ Osinal (Y/T) Paduan baru Tgl. subst. Alasan Tgl switch Alasan Paduar d 12 bular d 12 bulan d 12 bular d 12 bulan 1 12 bulan d 12 bular 12 bula Pd 12 bulan d 12 bulan 12 bula 2 600

REGISTER ART



Report ART Lembar 1

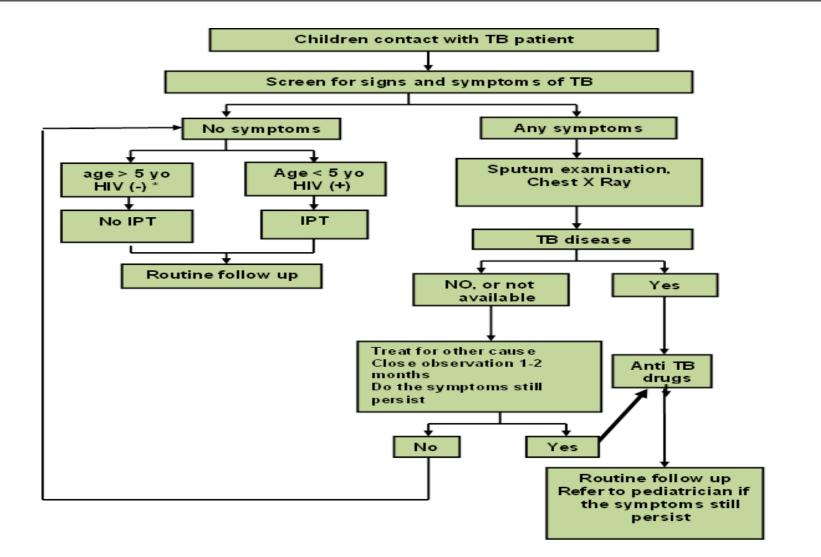
| | Report 💭 Export | Tools | Осоонт |
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| ۲ | Report IMS | • | |
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| 0 | Report Penjangkauan | • | 👌 ART Lembar 2 |
| ۲ | Report Dukungan ODHA | | 🔗 Kohort Bulanan |
| 0 | Report Alat & Bahan | | 👌 Kohort Tahunan |
| ۲ | Report surveilans | | 👌 Stok Obat |

PERAWATAN HIV DAN ART UPK : PUSKESMAS KEC. GAMBIR Kabupaten / Kota JAKARTA PUSAT Bulan : F Provinsi : DKI Jakarta Tahun: 2 LAKI - LAKI PEREMPUAN VARIABEL <1 1-14 15-19 20-24 25-49 >50 Jml <1 1-14 15-19 20-24 25-49 >50 Jml ¹ Masuk dalam perawatan HIV 0 0 0 0 0 0 1.1 Jumlah kumulatif orang yang pernah masuk perawatan HIV s/d akhir bulan lalu 0 0 0 0 0 0 0 0 0 1 0 1 0 0 1.2 Jumlah orang baru yang masuk (termasuk rujuk masuk) perawatan HIV selama bulan in 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 1.3 Jumlah orang yang rujuk keluar perawatan HIV selama bulan ini 1.4 Jumlah kumulatif orang yang pernah masuk perawatan HIV s/d akhir bulan ini 0 0 0 0 1 0 1 0 0 0 1.5 Jumlah kumulatif ibu hamil yang pernah masuk perawatan HIV s/d akhir bulan lalu 0 0 0 0 0 1.6 Jumlah ibu hamil baru yang masuk (termasuk rujuk masuk) perawatan HIV selama bulan ini 0 0 0 0 0 1.7 Jumlah ibu hamil yang rujuk keluar perawatan HIV selama bulan ini 0 0 0 0 0 1.8 Jumlah kumulatif ibu hamil yang pernah masuk perawatan HIV s/d akhir bulan ini 0 0 0 0 0 0 0 0 0 0 1 0 1 0 0 0 0 0 0 1.9 Jumlah orang yang berkunjung ke perawatan HIV (termasuk ibu hamil) selama bulan ini nuhi syarat secara medis untuk ART

Implementation of Latent TB Infection for Children under 5 years old

- INH provision for children under 5 yo in Indonesia have been mentioned in National guideline since 2007 but the documentation form hasn't been developed
- In 2015, guidelines of contact investigation and IPT provision for children under 5 years old have been developed along with reporting recording format. The guidelines have been disseminated to 7 provinces in the last quarter of 2015
- NTP have procured INH 100 mg and ensured its availability

Algorithmic Approach to Diagnosis and Treatment LTBI for Children under 5 years old



Reporting and Recording form for IPT provision children <5yrs

| PENANGGULANGAN TB NASIONA | KARTU PE | NGOBATAN PASI | IN TB | TB. | |
|--|---|--|--|---|---------------|
| | Imur : tahun bula | | : | No. Telp/HP : | N/20 |
| Berat badan : kg | Tinggi badan : cm | No. Reg TB.03 Kab | /Kota : | | |
| Bulan Hasil Pemeriksaan Contoh Uji (Ses Bulan BTA*) G Image Ses G Image Ses Bulan Pemeriksaan Contoh Uji (Ses Pemeriksaan Contoh Uji (Ses Pemeriksaan Contoh Uji (Ses S Image Ses Viji Tuberkulin: mm (Indur Viji Tuberkulin: (mm) | Biakan Tes Cepat hasil pemeriksaan dahak asi bukan eritema) | Tipe Diagnosis Terkonfirmasi bakteri Terkonfirmasi bakteri Terkonfirmasi bakteri Klasifikasi berdasarkan riw Diobati setelah gagal Lain-lain Klasifikasi berdasarkan sta Positif Dirujuk oleh: Inisiati Faskes | ologis TB Pa TB Ek ayat pengobatan sebe Kambuh Diobati setelah Riwayat pengol tus HIV Tidak diketahui Pasien/Keluarga | berdasarkan lokasi anatom ru straparu, Lokasi lumnya putus berobat (<i>lost to follo</i> batan sebelumnya tidak dik Anggota Masyarakat/Kade Dokter Praktek Mandiri Lain-lain | w up etahu |
| Foto toraks: Tanggal:/ N Kesan: | Jo Seri: | Pemeriksaan Kontak | | n anak, sebutkar | |
| Sebutkan | MTB Bukan MTB Tidak Negatif Inj. Insulin | 1 2 3 4 5 *) Hasil diisi: Untuk Dewa Untuk Anak | isa: Sehat/Sakit TB :Sehat/Infeksi Laten TB/S | akit TB | |
| NANGGULANGAN TB NASIONAL | KARTU PENGOBATAI | N PENCEGAHAN TB | | IN | TB. |
| ta Pasien : : mat Lengkap : Kota : A Ayah/Ibu : | No.Telp/HP : Provinsi : | Jenis Kelamin Tanggal Lahir No. Register PP I NH Kab/ Kot Nama Faskes | : LP ://Umu : : | r : Tahun [| |
| teria Pengobatan Pencegahan : | | | | | |
| Anak < 5 Tahun | | | Kasus Indeks | | |
| ODHA Lainn | ya, se butkan: | Nama | | | |
| eriksaan Lain-Lain: | | Alamat | | | |
| UjiTuberkulin FotoRontgen Dada | | No.Reg TB | | | |
| | | | | | |
| tBCG: Va Tidak | | | Pemeriksaan Bakteriologi: | | |
| giBadan: Berat Badan: | | Tanggal Pemeriksaan | Noreglab BTA | Biakan Tes Cepat | |
| s INH: | | | | | |
| 10 mg/kg 88 | | Sumber Obat : Pro | ogram Baya | rSendiri | |
| 20 mg/kg88 (dosis tinggi) | | As | uransi Iain- | lain | |
| GOBATAN Bulan 1 2 3 4 5 6 7 | 8 9 10 11 12 13 14 15 | | | | 2 |
| Bulan 1 2 3 4 5 6 7 | <u>, , , , , , , , , , , , , , , , , , , </u> | 20 20 21 20 21 Z | 2 2 24 25 26 27 | 28 29 30 31 Jumlah do | 25 |
| | | ++++++ | + $+$ $+$ $+$ $+$ $+$ $+$ $+$ $+$ $+$ | | _ |
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|----------------------|---|--------------------|--------------------------------|--|--------------|------------------------------------|--|---------------------------|------------------|---------------|-------|
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| | | | | | | | Tahun Triwulan Bulan | | | | |
| | Hasil Akhir | - | | Tindal | k Lanjut | | Tanggal mulal | | Hasil | PP INH | |
| Sakit TB | | Tidak ada bukti | QAT | PPINH | Observasi | Evaluasi persistens I gejala | PP INH | Pengobat an lengkap | Putus berobat | Meningga I | Gagal |
| 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 |
| | | | | P | a | ge | e 2 | 2 | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| lanjut dii member | 5,16) Tind si dengan ikan tanda dak lanjut | a rumput | INH diis pertama pencega | nggal mula si tanggal a pengoba ahan INH n pada ko | hari Itan | | (18,19,20,21 diisi dengan diketahui pa yang sesua | hasil pen da kolom | gobatan | | |

| | | KESEHATAI | | | | | | | | TAHUN: TRIWULAN: | | | | | | | | |
|----------------------------|--|-----------|--------|--|---|-------------|-------------|-----------------------|-----|---------------------|----------------------------------|-----------------------------------|-----------------|-----------------------|------------------|-----------|------|--|
| No NIK Kasus indeks | | | Alamat | | | sia | Hasil akhir | | | Tindak lanjut | | | | Tanggal | Hasil PP INH | | | |
| Nama Sensitif/ Resistan | | | kontak | | P | Sakit TB | ILTB | Tidak ada bukti | OAT | PP INH | Observasi timbulnya gejala | Evaluasi persistensi gejala | mulai PP INH | Pengobatan lengkap | Putus berobat | Meninggal | Gaga | |
| | | | | | | | | | | | | | | | | | | |
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Challenges

IPT for PLWHA

- Low enrollment rate for IPT among PLWHA (610/3809)
- Dissemination process from central level to district
- To increase commitment from clinician for IPT
- To maintain patient adherence

IPT for children under 5 years old :

- Process to expand implementation nationwide
- Difficulties in diagnosing TB in children
- Maintaining patient adherence

Further opportunities for the implementation of the programmatic management of LTBI

- IPT for TB in congregate setting
 - From on going study of latent TB infection in Jakarta prison, approximately 52% inmates have latent TB infection
- Integrate IPT to PMTCT
- LTBI treatment for DR TB contact
- Shorter duration of treatment

