

# 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	<ul style="list-style-type: none"> <li>• PLHIV</li> <li>• Contacts (children)</li> </ul>	<ul style="list-style-type: none"> <li>• PLHIV</li> <li>• Contacts (adult and children)</li> <li>• Patients initiating anti-TNF treatment</li> <li>• Patients receiving dialysis</li> <li>• Patients preparing for transplantation</li> <li>• Patients with silicosis</li> </ul>
Conditional		<ul style="list-style-type: none"> <li>• Prisoners</li> <li>• Health workers</li> <li>• Immigrants from HBC</li> <li>• Homeless persons</li> <li>• Illicit drug user</li> </ul>

Treatment of Latent TB infection in Indonesia focused on :

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

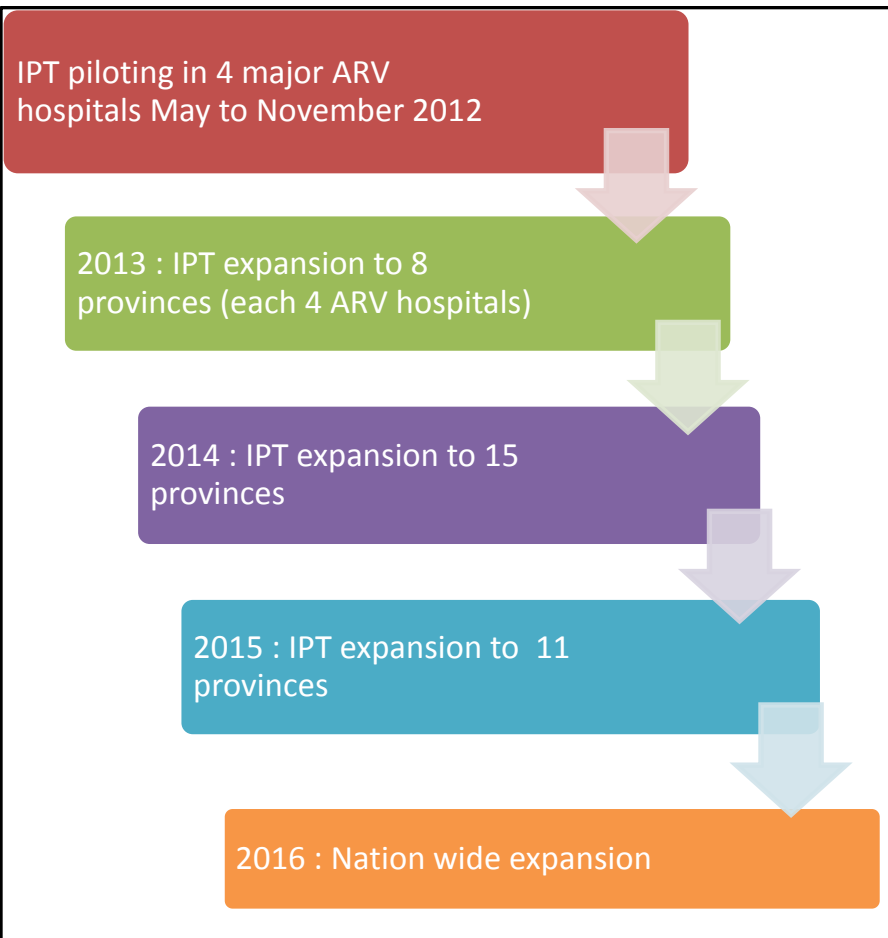
(National TB guideline 2015, TB National strategic plan 2016-2019)

## TB High risk group population

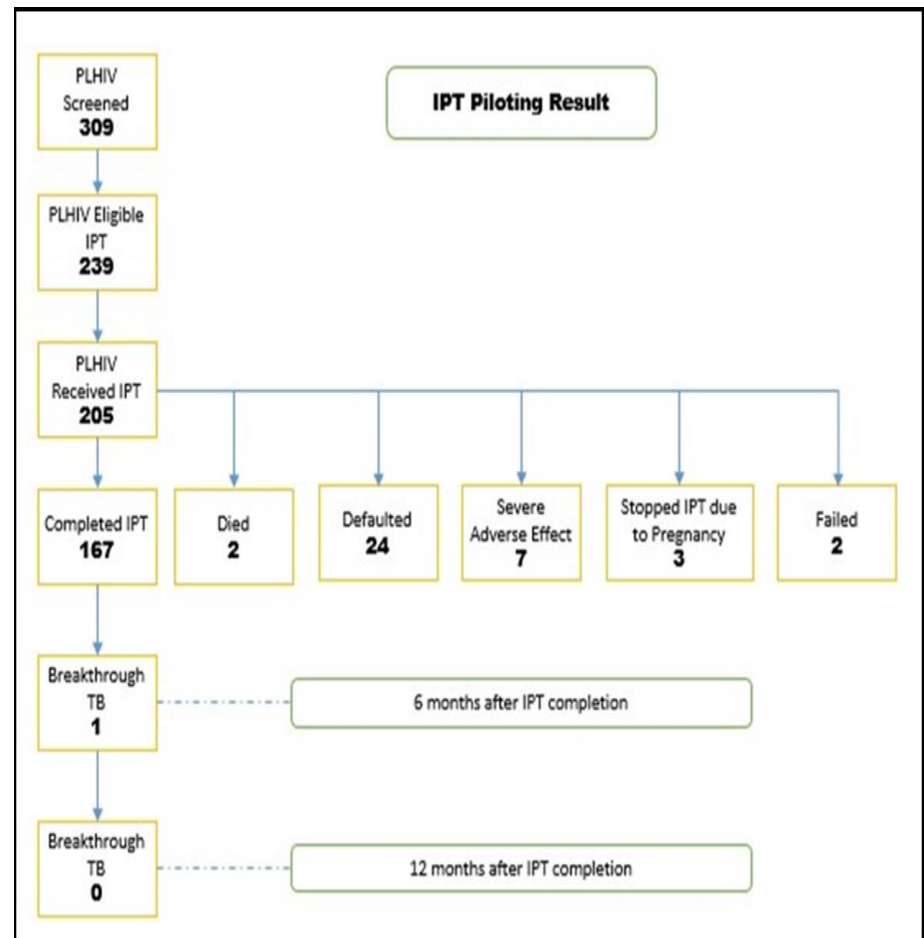
Sub-population	Population size estimate	Source of estimate
PLHIV	708,000	NAP (2014)*
Contacts to bacteriologically positive pulmonary TB	2,795,000	Estimates based on NSP 2013
People > 55 years of age	31,310,000	BPS 2014
Urban poor	10,500,000	BPS 2014
Prisoners, including pre-trial detainees	167,000	Ditjen 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

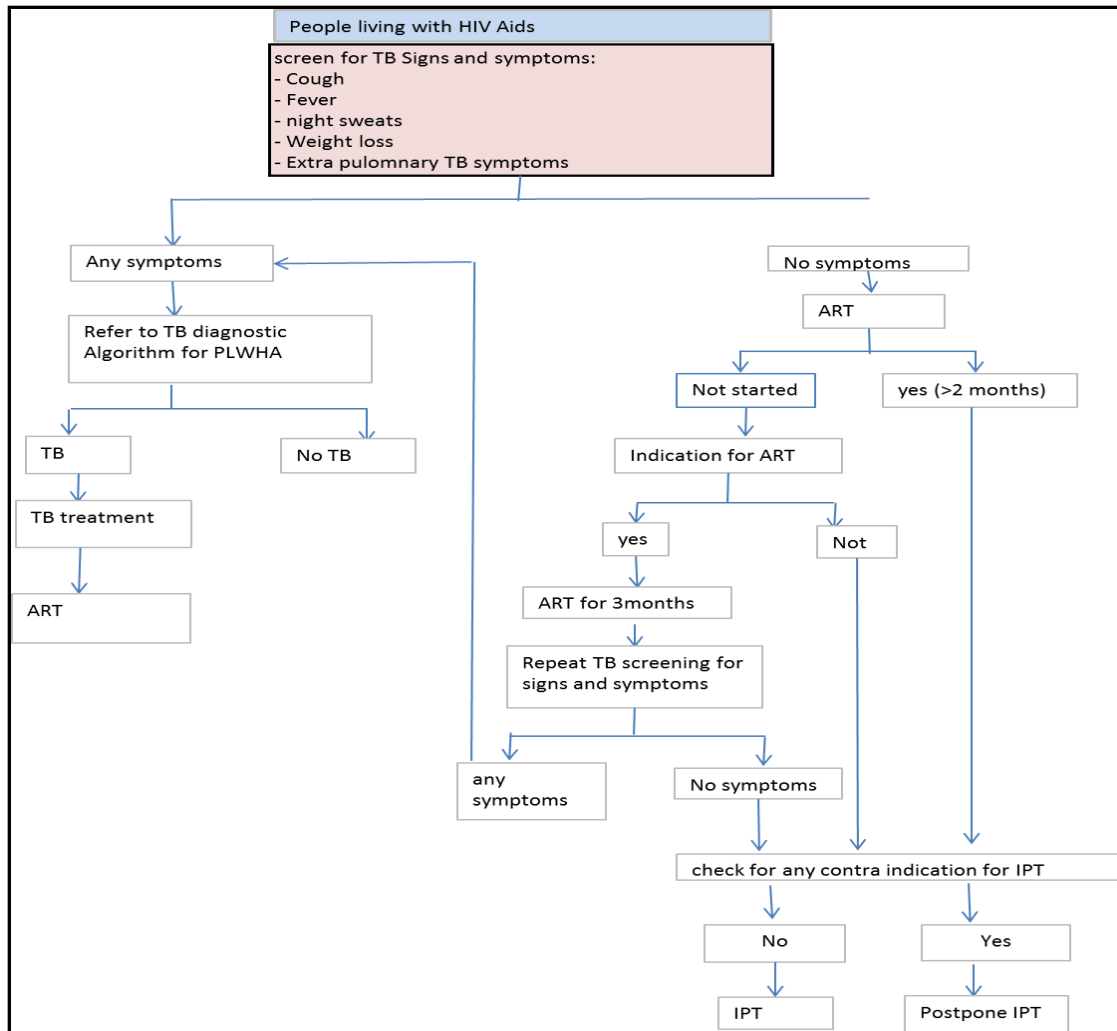
## Steps of IPT for PLWHA implementation in Indonesia



## 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)

**FORMULIR PENILAIAN KRITERIA PASIEN UNTUK PEMBERIAN IPT**

Input Data Report Help  
Form IPT-1

Tambah  
Edit  
Hapus  
Lihat Tabel

Nama pasien : \_\_\_\_\_ Tanggal mulai pemberian : 19/01/2012 Jenis Kelamin : \_\_\_\_\_  
Alamat pasien : \_\_\_\_\_ Umur : \_\_\_\_\_ Tahun

**A. Tanda dan gejala TB, kontraindikasi INH, Kepatuhan, Pengobatan TB dan Informasi lain**

**1. Skoring Tanda dan Gejala TB**

<input type="checkbox"/> 1.1 Batuk lebih dari 2 minggu	<input type="checkbox"/> 1.3 Keingap malam	<input type="checkbox"/> 2.1 Ikterus	<input type="checkbox"/> 2.4 Efek samping berat terhadap alkohol
<input type="checkbox"/> 1.2 Demam lebih dari satu bulan	<input type="checkbox"/> 1.4 Berat badan turun	<input type="checkbox"/> 2.2 SGOT dan SGPT > 3x	<input type="checkbox"/> 2.5 Kelelahan
<input type="checkbox"/> 1.5 Linfadenopati coll	<input type="checkbox"/> 2.3 Gejala neuropati perifer		

**3. Penilaian Kepatuhan**

<input type="checkbox"/> 3.1 Umur < 18 tahun	<input type="checkbox"/> 4.1 Sedang mendapatkan pengobatan TB
<input type="checkbox"/> 3.2 Alamat rumah berpindah-pindah	
<input type="checkbox"/> 3.3 Menolak untuk dikunjungi di rumah	

**2. Kontraindikasi INH**

**4. Pengobatan TB**

<input type="checkbox"/> 5.1 Kehamilan
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**B. Pemeriksaan Lab dan Radiologi**

**1. Hasil foto toraks** 30/10/2012

**2. Hasil pemeriksaan mikroskopis dahak** 30/10/2012

**3. Hasil pemeriksaan GenExpert** 30/10/2012

**KESIMPULAN:** TB IPT  Berbeda  dban INH  No IPT:

**C. Informasi Tambahan**

**1. Riwayat Pengobatan TB**

<input type="checkbox"/> 1.1 Pernah ikut pengobatan TB s/d selesai	<input type="checkbox"/> 2.1 Merenghis, PCP	<input type="checkbox"/> 2.4 Sedang pengobatan ARV
<input type="checkbox"/> 1.2 Terada, lama pengobatan > 4 bh	<input type="checkbox"/> 2.2 Kandidiasis Oral	<input type="checkbox"/> 2.5 Dilakukan pemeriksaan CD4
<input type="checkbox"/> 1.3 Terada, lama pengobatan < 4 bh	<input type="checkbox"/> 2.3 Diare kronik > 1 bh	

**3. Informasi terkait NAPZA**

<input type="checkbox"/> 3.1 Penasun	<input type="checkbox"/> 3.3 Sedang dalam terapi substitusi metadon
<input type="checkbox"/> 3.2 Pengguna NAPZA lainnya	<input type="checkbox"/> 3.4 Sedang dalam terapi substitusi subteks

Tanggal 19/01/2012 Pemeriksa \_\_\_\_\_

http://www.iptis.com/home.php IPTIS Server

File Edit View Favorites Tools Help

**Isoniazid Preventive Therapy Information System (IPTIS) Server**

Menu

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Selamat Datang, admin

Pilih UPK: User

Silakan Pilih File Excel:

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Power8

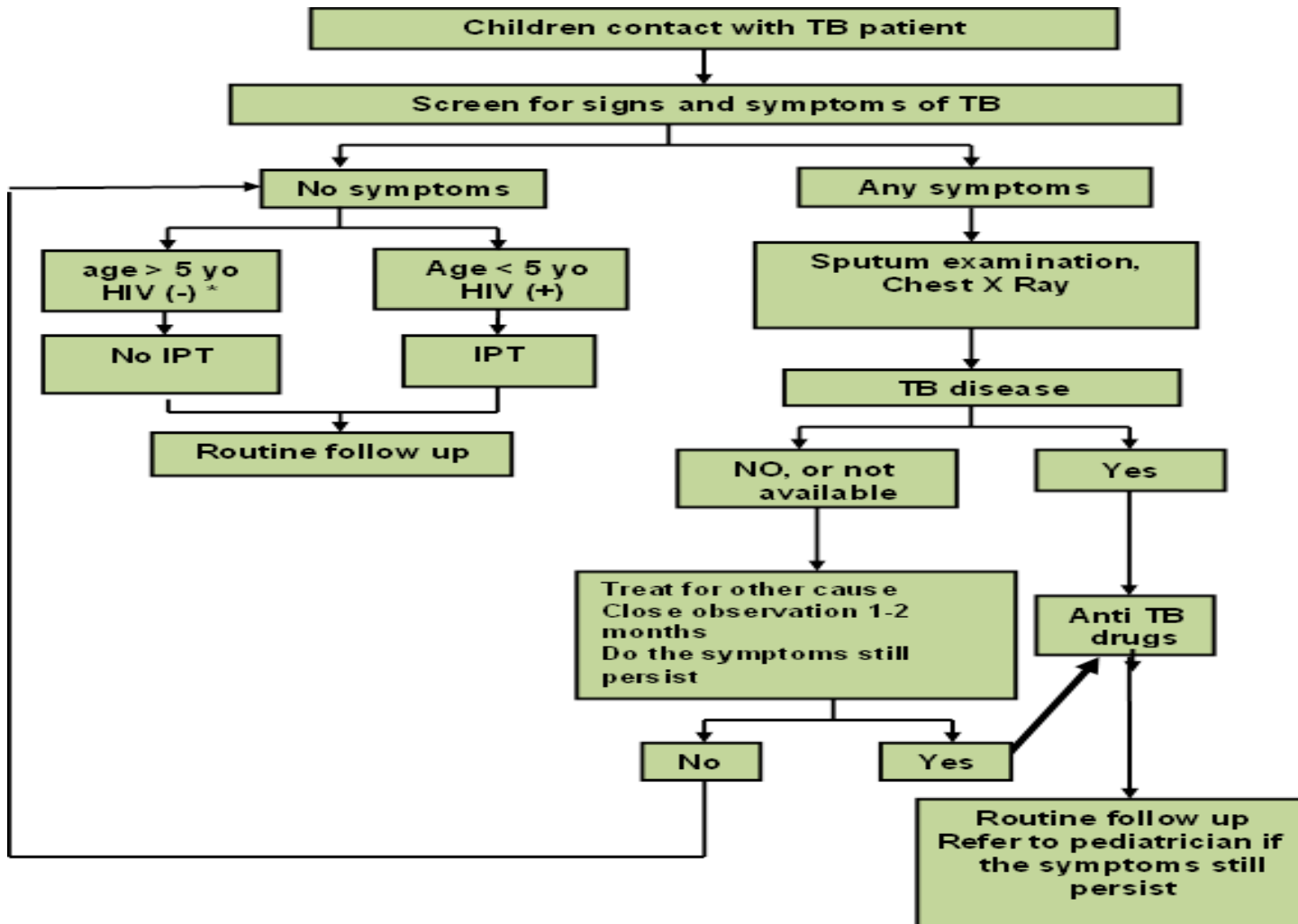


# Implementation of Latent TB Infection for Children under 5 years old

- 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





# 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

