Decentralized Integrated TB/HIV Program in an Unstable Environment (Nimba County, Liberia)

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**Liberia**

- 14 years of Civil war from 1989-2003
- 100,000 Internal Displaced People, 230,000 refugees in neighboring countries
- Maternal Mortality: 587/100,000
- Infant Mortality: 157/1,000
- Under-five Mortality: 235/1,000
- 1 Medical Doctor/ 100,000 population
- Life expectancy: 41 years
- Population with access to safe water: 24%
- Population below poverty line: 80%

**HIV/TB Program**

- VCT started in March 2005
- ARV treatment since November 2005
- Staff: 3 VCT Counselors in the Hospital
  - 1 VCT Counselor in each Clinic
  - 3 HIV/TB nurses
  - 1 Expat MD
  - 5 Community Clinic Workers (CCW) per Clinic
- Facilities: 1 Hospital, 5 rural clinics, Catchment area population: 125,000
- VCT is offered to all ANC-patients and suspected/confirmed TB-patients

**Outreach:** Community education, HIV/TB-Awareness, Mobile VCT, Defaulte tracing + weekly Home Visits through 5 Community Clinic Workers per Clinic

**Hospital:** IPD (33 Bed), OPD, TB-Annex, Reproductive Health, Surgery, Laboratory, Walking blood bank

**Laboratory:** HB, WBC, CD4, Determine®-HIV+2, UniGold®-HIV, Hexagon®-Test, AFB: Staining + Microscopy in hospital lab,

**Clinics:** Lugbreeve Clinic, Beepoolar Clinic, Duotaiya Clinic, Zuhbey Clinic, Kamplay Clinic, daily VCT, weekly supervision and follow-up of HIV/TB patients, ANC

**VCT Numbers**

- ANC patients accepting VCT
- # +pos (January 2005 - June 2006 n=124; 4.6%)
- Total # VCT (January 2005 - June 2006 n=2707)
- Pt. with concomitant TB: 21%

**Patients on Follow-up/treatment**

- 3TC-D4T-NVP 16% (n = 20)
- AZT-3TC-NVP 1% (n = 1)
- 3TC-D4T-EFV 5% (n = 6)
- Other 35% (n = 43)

Under Follow-up 43% (n = 54)