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**ET DES AFFAIRES** 

ÉTRANGÈRES

UNDER THE

SUPERVISION OF

AS PART OF THE FRENCH CONTRIBUTION TO



CaPThai

TB Case–Finding, Treatment and Prevention Intervention in Thailand THE CAPTHAI PROJECT: TRANSFORMING TUBERCULOSIS CONTROL IN THAILAND THROUGH INNOVATIVE STRATEGIC PUBLIC HEALTH INTERVENTIONS

**Dr Phalin Kamolwat**, Medical officer, advisory level of Tuberculosis, Department of Disease Control, Ministry of Public Health, Thailand

Dr Tamara Tovar-Sanchez, Project Manager, IRD, France











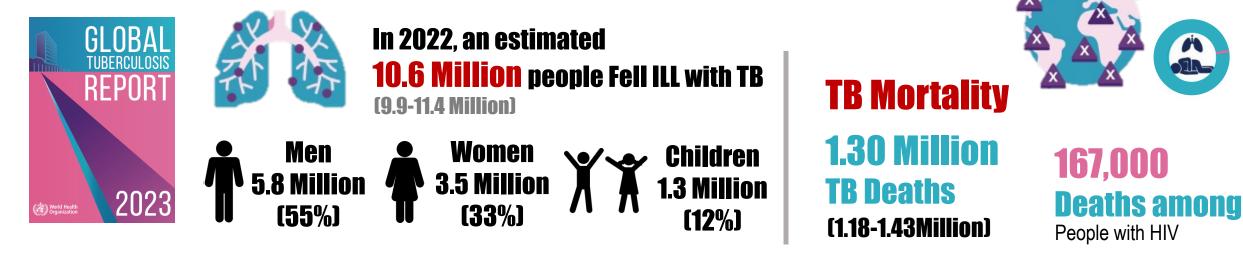
## TUBERCULOSIS BURDEN

#### Global and situation in Thailand

Dr Phalin Kamolwat

## **Global Tuberculosis Report 2023**

## TB <u>Incidence</u> 133 / 100,000 pop.



## **Drug-resistant TB**

## **410,000 Fell ILL with drugresistant TB (370,000-450,000)**



176.6K Laboratory-confirmed cases 175.7K Patients started on treatment TB/HIV

**671,000** (600,000-746,000)

People living with HIV Fell ill with TB

#### TB/HIV care in new and relapse TB patients

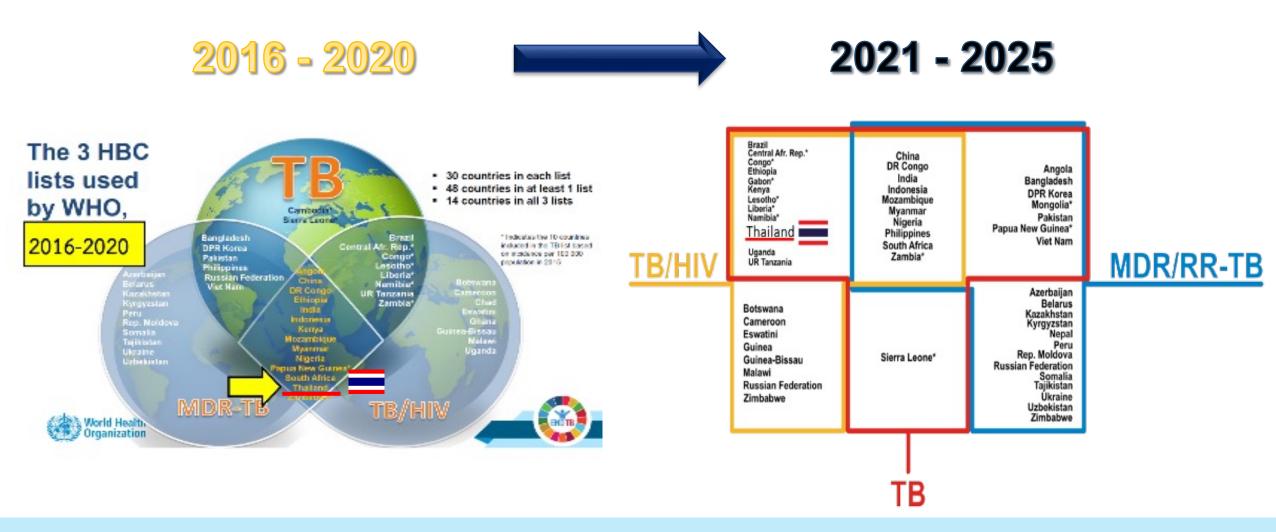


Patients with known HIV status who are HIV-positive

## 365,000

HIV-positive TB patients on ART

## WHO global lists of high TB burden countries



In year 2021 – 2025: Thailand was removed from the list of the 30 high MDR/RR-TB burden countries.

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## **Sustainable Development Goals: SDGs**

#### SDG3: Good Health and Well-being

THAILAND: SDGs Global rank 41 of 166



📕 Major challenges 📲 Significant challenges 📒 Challenges remain 📲 SDG achieved 📗 Information unavailable –

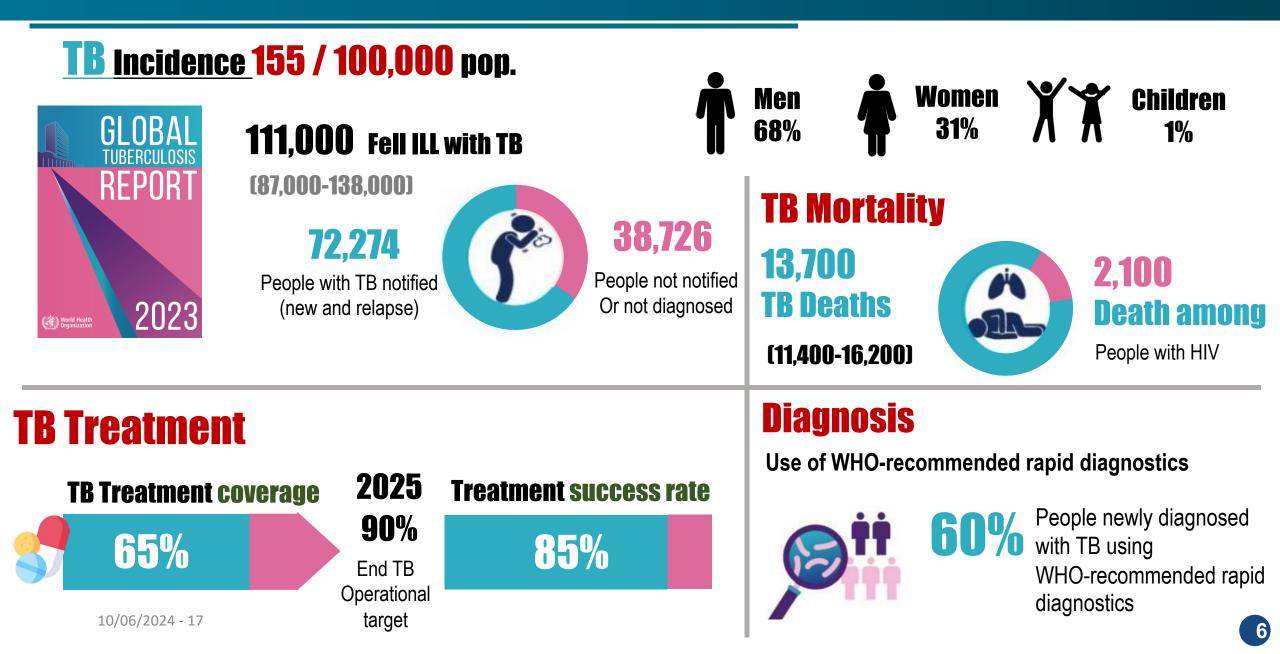
#### 🔸 Decreasing \Rightarrow Stagnating 🗦 Moderately improving 🐴 On track or maintaining SDS achievement 🔹 Information unavailable

| Indicator  | Green       | Yellow  | Orange  | Red   |                  |
|--|-------------|---|---|-------|------------------|
| Incidence of tuberculosis (per 100,000 pop.)   | <u>≤</u> 10 | 10 <x≤42.5< td=""><td>42.5<x≤75< td=""><td>&gt;75</td><td>153 (2018)</td></x≤75<></td></x≤42.5<>    | 42.5 <x≤75< td=""><td>&gt;75</td><td>153 (2018)</td></x≤75<>        | >75   | 153 (2018)       |
| Traffic death (per 100,000 pop.)   | ≤ 8.4       | 8.4 <x≤12.6< td=""><td>12.6&lt;×≤16.8</td><td>&gt;16.8</td><td>32.7 (2016)</td></x≤12.6<>           | 12.6<×≤16.8   | >16.8 | 32.7 (2016)      |
| Adolescent fertility rate (birth per 1,000<br>adolescent females aged 15-19)   | ≤ 25        | 25 <x≤37.5< td=""><td>37.5≺x≤50</td><td>&gt;50</td><td>44.9 (2017)</td></x≤37.5<>                   | 37.5≺x≤50   | >50   | 44.9 (2017)      |
| Age-standardized death rate attributable to<br>household air pollution and ambient air<br>pollution (per 100,000 pop.) | ≤ 18        | 18 <x≤84< td=""><td>84<x≤150< td=""><td>&gt;150</td><td><b>61</b> (2016)</td></x≤150<></td></x≤84<> | 84 <x≤150< td=""><td>&gt;150</td><td><b>61</b> (2016)</td></x≤150<> | >150  | <b>61</b> (2016) |
| Life expectancy at birth (years)   | ≤ 80        | 80 <x≤75< td=""><td>75<x≤70< td=""><td>&gt;70</td><td>75.5 (2016)</td></x≤70<></td></x≤75<>         | 75 <x≤70< td=""><td>&gt;70</td><td>75.5 (2016)</td></x≤70<>         | >70   | 75.5 (2016)      |

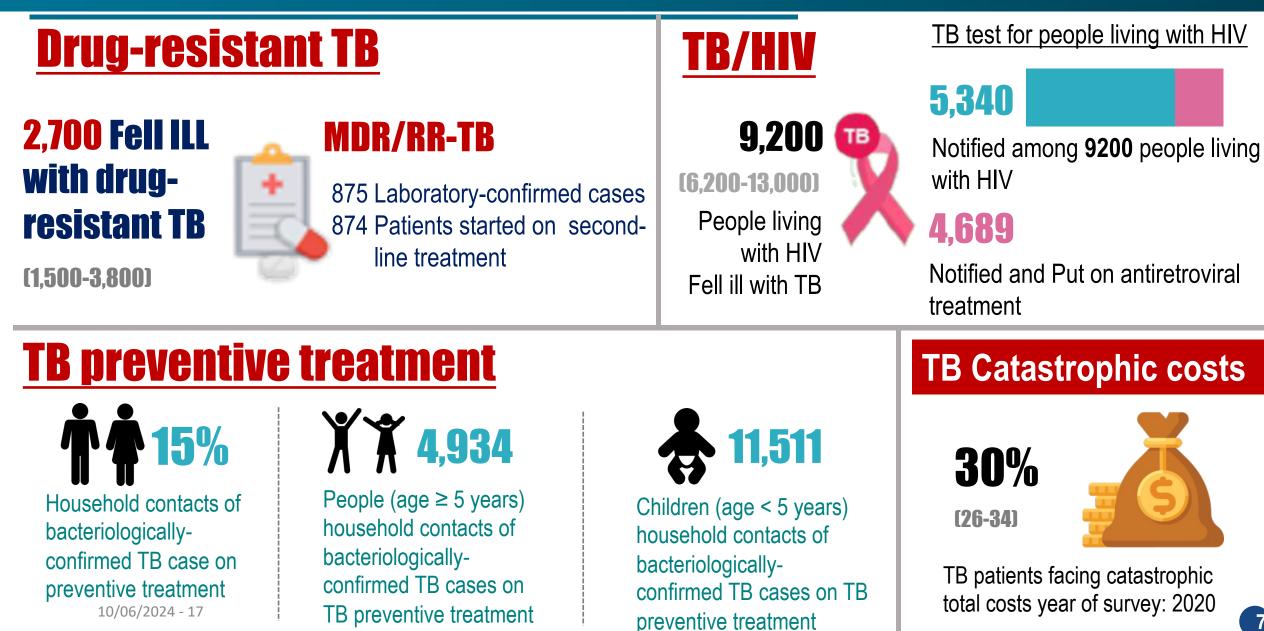
#### SDGs index In Thailand

| SDG3 – Good Health and Well-Being   |              |          |
|---|--------------|----------|
| Maternal mortality rate (per 100,000 live births)   | 37 2017 (    | • 1      |
| Neonatal mortality rate (per 1,000 live births)   | 5.3 2019     | • 1      |
| Mortality rate, under-5 (per 1,000 live births)   | 9.0 2019     | 1        |
| Incidence of tuberculosis (per 100,000 population)  | 150.0 2019 ( | • •      |
| New HIV infections (per 1,000 uninfected population)  | 0.1 2019     | <b>۲</b> |
| Age-standardized death rate due to cardiovascular disease, cancer,<br>diabetes, or chronic respiratory disease in adults aged 30–70 years (%) | 14.5 2016    | • •      |
| Age-standardized death rate attributable to household air pollution and ambient air pollution (per 100,000 population)                        | 61 2016 🤇    | •        |
| Traffic deaths (per 100,000 population)   | 32.2 2019    | • •      |
| Life expectancy at birth (years)  | 77.7 2019    | • •      |
| Adolescent fertility rate (births per 1,000 females aged 15 to 19)  | 44.7 2018    | 7        |
| Births attended by skilled health personnel (%)   | 99.1 2016    | • 1      |
| Surviving infants who received 2 WHO-recommended vaccines (%)   | 96 2019      | • ↑      |
| Universal health coverage (UHC) index of service coverage<br>(worst 0–100 best)   | 80 2017      | • 1      |
| Subjective well-being (average ladder score, worst 0–10 best)   | 6.0 2019     | • 1      |

## **Thailand Tuberculosis Situation 2022**



## **Thailand Tuberculosis Situation 2022**



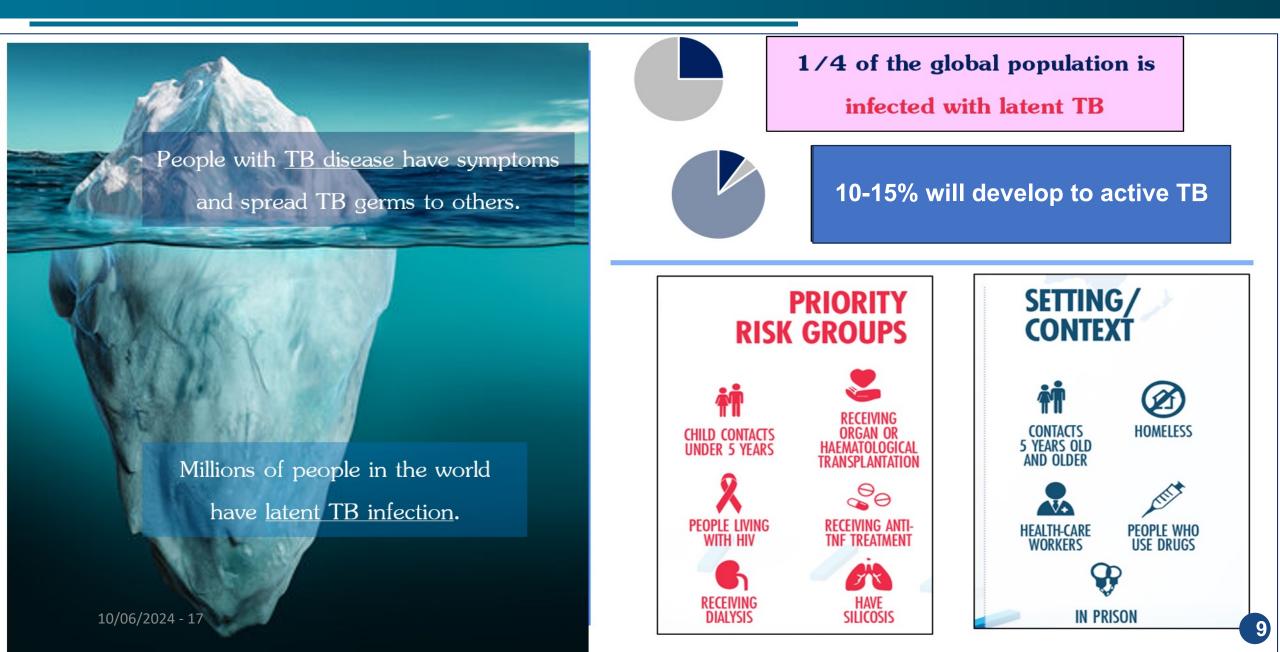
#### Estimated and number of TB cases, 2000-2023



2000 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2016 2017 2018 2019 2020 2021 2022 2023 10/06/2024 - 17 Source : 2016 - 2022, WHO, Global TB Report

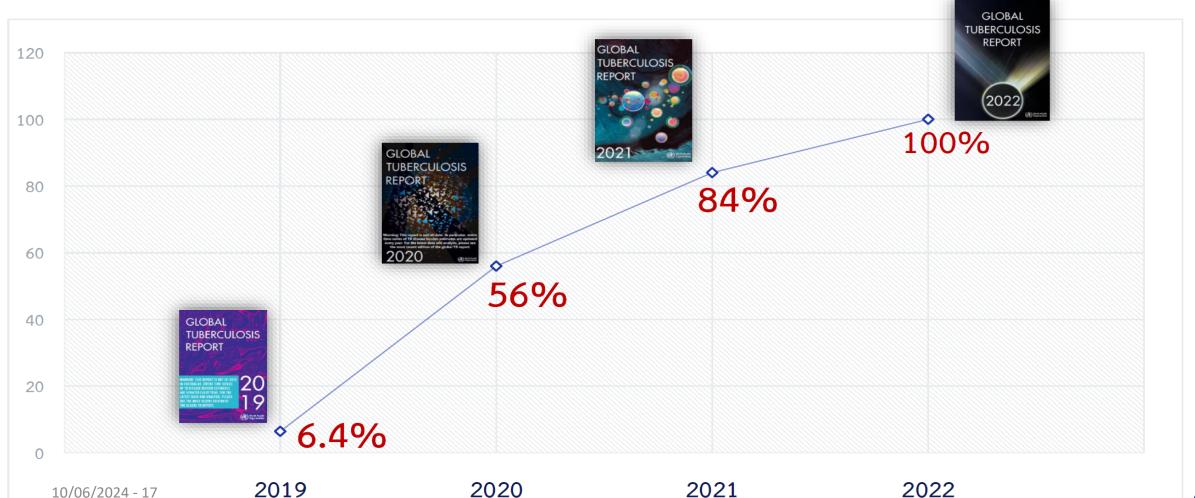
2023, Division of TB, NTIP, March 6, 20

## **Tuberculosis disease: Only the tip of the Iceberg**



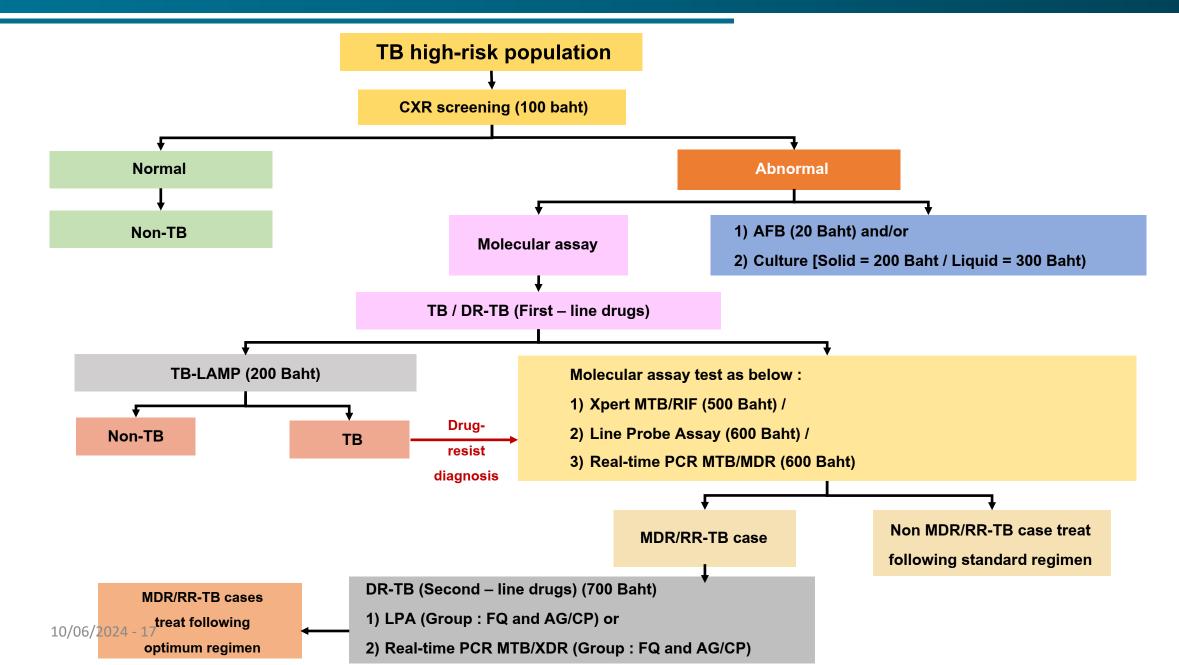
## **Global TB Report: TPT Thailand**

Percentage of household contacts among children aged < 5 years old of bacteriologically confirmed

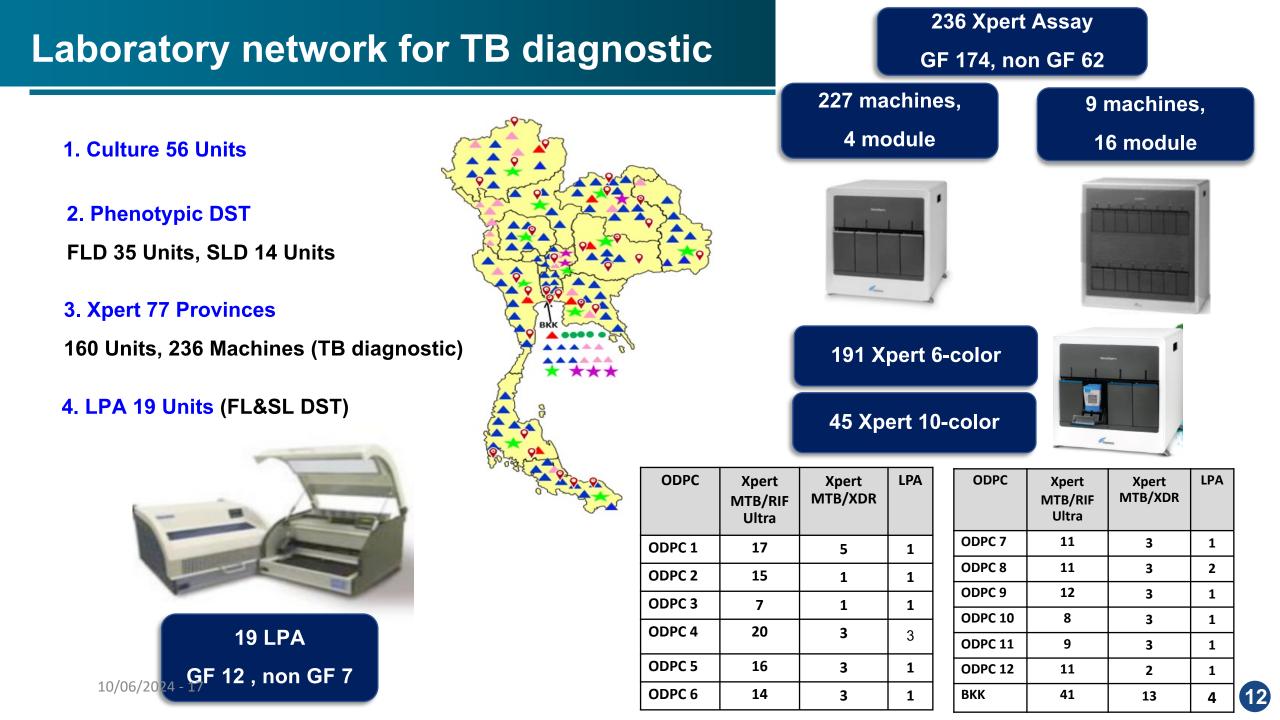


**TB** cases on preventive treatment

### Benefit of health security system for TB high-risk population in 2023



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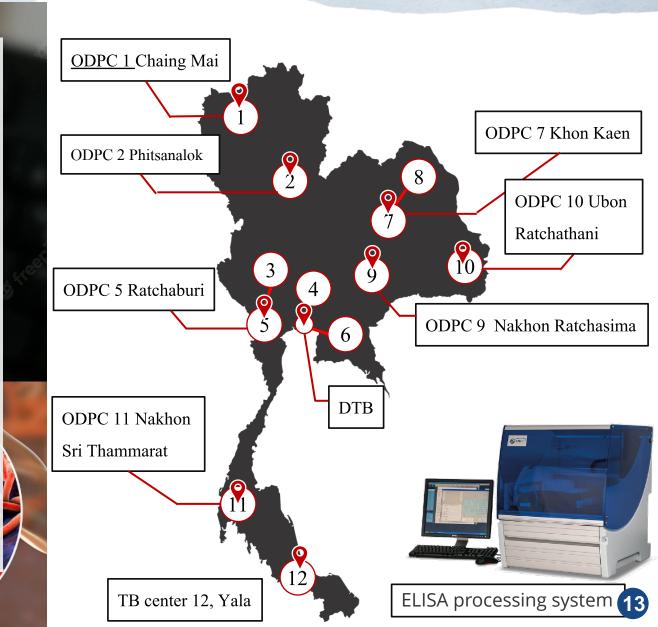
## **IGRA** center

10/06/



#### **IGRA Center 9 site**

**ODPC 1 Chaing Mai ODPC 2 Phitsanalok ODPC 5 Ratchaburi ODPC 7 Khon Kaen (ODPC 7+8) ODPC 9 Nakhon Ratchasima ODPC 10 Ubon Ratchathani ODPC 11 Nakhon Sri Thammarat ODPC 12 Songkhla (TB center 12, Yala)** DTB (ODPC 3, 4, 6, Bangkok)









## RESEARCH PROJECT

#### The method and the strategic pack

Dr Tamara Tovar Sanchez

## International collaboration of CaPThai project



A research grant from :





## Signature of a MOU for the CaPThai project



Dr. Phalin Kamolwat, MD Division of Juberculosis



Dr. Christian Lienhardt Institute de Recherche pour le Développement – IRD



Prof. Katherine Fielding London School of Hygiene and Tropical Medicine



Dr Jintana Ngamvithayapong- Yanai TB/HIV Research Foundation, Thailand





## **RESEARCH PROJECT**



Objective: To evaluate whether a public health intervention package focusing on increased active case-finding and uptake of TB preventive therapy in households of newly detected TB cases in Thailand can be efficient in improving TB control.



## **METHODOLOGY**

PRAGMATIC PHASE IV RANDOMIZED CONTROLLED TRIAL

#### Design:

Stepped-Wedge Cluster-Randomized Trial (SW-CRT)

#### **Population:**

Households (HH) contacts of newly bacteriologically confirmed TB case living in the same household for the last 3 months

#### **Cluster:**

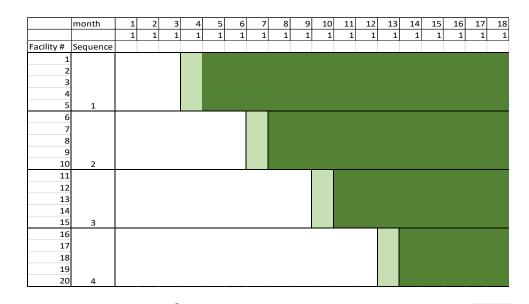
20 provincial hospitals with TB notification >150 cases/year

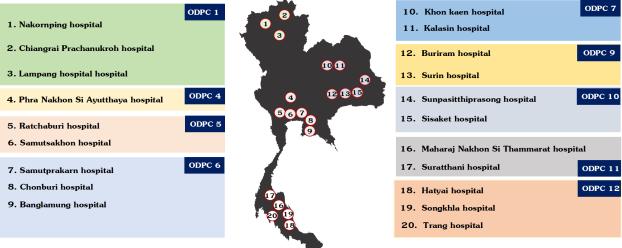
#### Sequence:

4 clusters (5 hospitals) switching from control to intervention every 3 months

#### Analysis:

*Effectiveness, adherence and safety in intervention (Active Case-Finding strategies and TPT shortest courses) vs control phase (Current Standard of Care)* 











## CONCLUSION

**Public Health Impact** 

#### Project current status

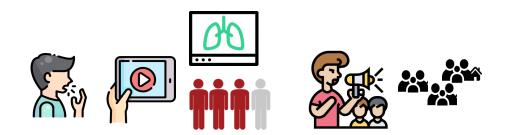


## **TB PREVENTION MODEL FOR THAILAND AND BEYOND**

The present study protocol incorporates pragmatic design features and includes patientcentred care outcomes, whilst respecting the rigor of clinical research, to support the decision-making to implement a public health strategic pack.

The long-term benefits and scale-up at national level of ACF strategies and TPT shortest regimens, directly benefiting all HHC of active TB cases detected within the frame of the study amongst nationals and migrant populations, PLWHIV, adults and children.

## HEALTH SYSTEM CAPACITY-BUILDING



## Activity of CaPThai project



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## **Site Assessment visits**

### **Pilot Phase**









## Trial initiation May 7th 2024





Department of Disease Control Division of Tuberculosis



Institut de Recherche pour le Développement





# Thank you

For your attention



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