WHERE ARE THE TB PATIENTS? REFLECTIONS FROM LOW YIELD OF TUBERCULOSIS CONTACT TRACING AND INVESTIGATION IN UGANDAN MILITARY HEALTH FACILITIES

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Background and Methods

Background:

- Tuberculosis (TB) affects up to 8.8 million people each year, most of whom live in low-and middle-income countries.
- One of ‘WHO 2035 End TB strategies’ is TB contact tracing and investigation used to increase TB cases. Little has been reported on the success of this strategy, especially in military health facilities.
- We describe the process, outcomes and implications of a TB contact tracing program in Uganda military health facilities supported by the URC - Department of Defense HIV/AIDS prevention program (DHAPP).
- We also draw from other global, regional and national case studies on TB contact tracing to provide recommendations.

Methods:

- TB contact tracing was implemented within 28 military health facilities for a period of 4 months.
- TB patients’ charts were reviewed for locator information and contacts traced by community linkage teams.
- Family members were screened for TB with those suspected to have TB fully investigated according to standard procedures.
- Data from the TB contact tracing exercise was analysed and used to improve program performance.
Results and conclusion

**Results:**

- 199 (103 males, 96 females) TB patients were enlisted, of these 87 (F: 62, 71%; M: 25, 29%) were identified for contact tracing.

- 221 contacts were traced, 33 (15%) of whom were children less than 5 years, 124 (56%) were females.

- Only 17 of those evaluated were bacteriologically diagnosed with TB, a prevalence of 7.7% among contacts.

**Conclusion:**

- The prevalence of TB as identified by investigations among contacts remains low.

- While this outcome could partly be a good sign in TB/HIV treatment and care, explanatory factors and effectiveness of contact tracing using the current strategy warrants further investigation and might require evidence-based review for efficacy and impact.