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PROJECT TB-SPEED

STRENGTHEN PAEDIATRIC TUBERCULOSIS SERVICES FOR ENHANCED EARLY DETECTION

Diagnosis of tuberculosis (TB) in young children is complex because of the difficulty of taking respiratory samples. To date, there is no rapid, effective diagnostic test for TB which is easy to use on children and can be completed easily, especially in primary healthcare centres and district hospitals in countries with a high incidence of TB, like Sierra Leone, where many children come with suspected tuberculosis. Thus, most children with TB are not diagnosed and therefore are not treated. **In 2015, 1 million new TB cases were documented worldwide and 210 000 children died from the disease.** Among these 1 million new cases, only 38% were notified to the WHO (« Global Tuberculosis Report». WHO. 2016).

Key Information



Project duration: 2017-2021 (4 years)



Beneficiaries: approximately 77,000 children in 7 countries



Source of funding: funded by Unitaid and Initiative 5%



Partners: University of Bordeaux • Ministry of Health and Hygiene (MOHS SL) • National Leprosy and Tuberculosis Control Programme (NLTCP) • WHO • Civil Society Movement against TB Sierra Leone • Ola During Paediatric Hospital • Health management teams in Bo and Port Loko districts



Intervention areas: Bo & Port Loko districts

OBJECTIVES

International operational research to improve early testing and enhance the treatment and care of paediatric tuberculosis

The TB-Speed project carries out research activities aiming at reducing childhood mortality from TB by evaluating innovative and cost-effective TB diagnostic approaches for resource-limited settings. It focuses on two major axes:

- Decentralisation of TB diagnosis at district level
- Systematic TB detection in highly vulnerable children (HIV-infected, severely malnourished)

The diagnostic approach includes procurement and use of a molecular diagnosis assay (XpertMTB/RIF Ultra) applied on nasopharyngeal aspirate and stool samples, introduction of digital chest radiography, as well as training and mentoring of clinicians for screening and diagnosis of Paediatric TB.

Implemented over a period of four years in seven countries of Africa and Asia (Cambodia, Cameroon, Côte d'Ivoire, Mozambique, Sierra Leone, Uganda, and Zambia), the project will contribute to screening of a total of approximately 77,000 children.

EXPECTED RESULTS

- New decentralized approaches for diagnosing childhood tuberculosis are being tested at the district health system level and in HIV-infected and malnourished children
- Identification of optimized, appropriate, and affordable specimen collection and treatment methods for the diagnosis of childhood tuberculosis in low-resource countries.
- Evaluation of the cost-effectiveness of the proposed diagnostic approaches.
- Dissemination, communication and stakeholder engagement

