

Specialized training in clinical and programmatic management of DR-TB

BACKGROUND

According to National DRS survey, for the year 2021, in Eritrea Rifampicin resistance among new and previously treated TB cases is 2.0 (1.0–3.6) and 7.5 (2.1–18.2) respectively. MDR-TB resistance among new and previously treated TB cases is 1.0 (0.3–2.3) and 3.8 (0.5–13.0) respectively.

SATISFACTION

100% of participants said the training was excellent or good
91% would recommend the course to their peers
72% felt confident in applying the skills acquired during the training to their daily work

THE PROBLEM

Eritrea started the Programmatic Management of Drug Resistant Tuberculosis (PMDT) in 2011. PMDT services were centralised in one site, which covered the whole country, at Marhano Hospital. Here, patients remained in hospital until culture-negative. The DR-TB treatment success rate in the last five years was around 86.6%, and every patient treated received free food, tests and financial support of 1,500 Nakfa (equivalent to 100 USD) per month. The Eritrean NTP is currently updating its guidelines and planning a PMDT expansion and decentralization process to increase access and availability of treatment for citizens, and children. The NTP identified a need for specialised training for staff in the decentralized PMDT centres, especially with the arrival of new drugs and recommendations.

THE UNION APPROACH

The Union delivered in September 2022 the first national DR-TB clinical and programmatic course in the country and was founded by the Global Fund TB Grant for Eritrea.

Comprising of five days of intensive and comprehensive training, it followed a practical methodology focused specifically on the necessities of Eritrea, a country with limited training and willing to increase access to treatment.

The course covered basics, clinical and programmatic management of DR-TB, as well as addressing complications using real-life circumstances, data and clinical case studies provided by participants:

- There were 30 participants including physicians from different regions of the country and key national decision makers.
- The course included 18 academic lectures, seven practical exercises, six case study reviews and a visit to the national reference DR-TB clinic.



THE RESULTS

The training was an opportunity which strengthened the country in terms of clinical practice and programmatic and policy management. The Union has offered continuous communication and support after the training. A follow up training might be delivered in 2023.

