New TB screening guidelines & recommendations from a civil society perspective
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TB screening guidance updates for PLHIV

3 People living with HIV should be systematically screened for TB disease at each visit to a health facility
(existing recommendation: strong recommendation, very low certainty of evidence).
Gap in guidance for children living with HIV

17 Among children younger than 10 years who are living with HIV, systematic screening for TB disease should be conducted using a symptom screen including any one of current cough, fever, poor weight gain or close contact with a TB patient

(new recommendation: strong recommendation, low certainty of evidence for test accuracy).

12 Among adults and adolescents living with HIV, C-reactive protein using a cut-off of >5mg/L may be used to screen for TB disease

(new recommendation: conditional recommendation, low certainty of evidence for test accuracy).

13 Among adults and adolescents living with HIV, chest X-ray may be used to screen for TB disease

(new recommendation: conditional recommendation, moderate certainty of evidence for test accuracy).

14 Among adults and adolescents living with HIV, molecular WHO-recommended rapid diagnostic tests may be used to screen for TB disease

(new recommendation: conditional recommendation, moderate certainty of evidence for test accuracy).

15 Adult and adolescent inpatients with HIV in medical wards where the TB prevalence is > 10% should be tested systematically for TB disease with a molecular WHO-recommended rapid diagnostic test

(new recommendation: strong recommendation, moderate certainty of evidence for test accuracy).
Slow uptake of WHO recommendations

"WHO has recommended use of the test since 2015, and a policy update was issued in 2019 (10). Among the 30 high burden TB/HIV countries, only 13 had a national policy and algorithm that includes the use of LF-LAM to assist in the diagnosis of TB in people living with HIV (Table 5.3), showing a slow adoption of this life-saving, easy-to-use diagnostic tool."

- WHO Global Tuberculosis Report 2020
Fair pricing of screening and diagnostic tests

- "Globally, 2.0 million new and relapse TB cases were identified by a WHO-recommended rapid diagnostic test in 2019, equivalent to 58% of all bacteriologically confirmed pulmonary cases."
  - WHO Global Tuberculosis Report 2020

Fair pricing is evidence-based pricing based on:
- Cost-of-goods-sold (COGS): the cost of manufacturing a product, which includes materials, labor, overhead, and intellectual property royalties
- Plus reasonable profit
- With volume-based price reductions as economies of scale thresholds are reached
Updated TB Screening Principles include:

» **Principle 1:** TB screening should always be done with the intention to follow up with appropriate medical care and ideally implemented where high-quality TB diagnostic and treatment services are available. *If a community lacks access to appropriate follow-up care but would benefit from TB screening, this should be an impetus for investment by national TB programmes in TB diagnosis and treatment services, in order to complement TB screening.*«