SCIENCE AND COMMUNITY IN THE RESPONSE TO HIV IN WESTERN AFRICA

AIDS 2018 POST-CONFERENCE WORKSHOP

Ghana, 12-13 May 2019
Integration of HIV management and co-infections - TB and Hepatitis
Challenges and Successes in Ghana
Day 2

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Objectives/Outline
Burden of HIV TB Hepatitis Co-infections
The experience in Ghana
Way Forward
• Tuberculosis (TB) is the most common presenting illness and cause of death in PLHIV, being responsible for one of every three HIV associated deaths

• Risk of developing tuberculosis (TB) is estimated to be between 16-27 times greater in people living with HIV than among those without HIV infection

• In 2015, there were an estimated 1.2 million cases of TB disease among people living with HIV. [11% of the 10.2 Million TB cases globally]
• Almost 60% of tuberculosis cases among people living with HIV were not diagnosed or treated, resulting in 390,000 tuberculosis-related deaths among people living with HIV.

• HIV coinfection also leads to the increased likelihood of false-negatives when testing for TB, further complicating the diagnosis of TB.

• Treatment is also more difficult with HIV coinfection as there are considerable interactions between drugs used to treat each infection.
• The global estimate of burden of HIV-HCV co-infection is 2.75 million

• HIV and HCV share common routes of transmission

• HIV-infected people are six times more likely than HIV un-infected people to have HCV infection

• Chronic HBV infection affects an estimated 5–20% of people living with HIV.

• The burden of co-infections are greatest in the African and South East Asia Regions.
• Experience in Ghana
  – The prevalence of HIV infection in TB patients about 14.7%
  – HIV/HBV coinfection prevalence rate estimated as 13.6 %
  – HBV/HCV co-infection among HIV-1 patients 18.0%
– True prevalence of coinfections is largely underreported, with many going unscreened and undetected

– HIV coinfections can facilitate the transmission of HIV, disease progression and mortality
Interventions in Ghana

– Joint TB HIV review meetings at National and Sub National level
– Screening of all PLHIV for TB
– Testing of all TB clients for HIV
Interventions in Ghana

– Routine Screening at ANC for TB, HIV, HBV and Syphilis
  • HIV Syphilis Combo test
– TB Preventative Therapy (TPT)
– One Stop Shop for TB and HIV care
• Challenges with payment for HIV and TB clients with co-infection
  – NHIA registration for TB clients
    • ?HIV and Hepatitis
• Hepatitis Program New in Ghana
  – Funding almost non existent
• Way Forward

  – Use of Multi-Disease Platforms
    • RDT combo for HIV, HBV, HCV, Syphilis
    • PCR devices that can test for over 10 infectious diseases

  – HIV, TB and Hepatitis Program integration
    • ? Global Fund support for Hepatitis
Reference:

• https://www.who.int
• Multi-disease diagnostic Landscape for integrated management of HIV, HCV, TB and other Co-Infections. UNITAID, Jan 2018
• Prevalence of HIV and hepatitis B coinfection in Ghana: a systematic review and meta-analysis, BioMed Central, May 2016
• Sero-prevalence of Hepatitis B and C viral co-infections among HIV-1 infected ART-naïve individuals in Kumasi, Ghana; PlosOne, April 2019