

Innovative approaches for Increased Case Finding: The role of house-house screening in TB case finding

Authors O Onazi¹; M Gidado¹; M Onoh²; J Yisa³; J Obasanya⁴; R Eneogu⁴; J Kuye⁴; S Gande¹

¹ TB CARE I PROJECT, ABUJA NIGERIA; ² THE LEPROSY MISSION NIGERIA (TLMN); AABUJA ³ NIGER STATE TBL CONTROL PROGRAM; ⁴ NATIONAL TUBERCULOSIS AND LEPROSY CONTROL, ABUJA;

Background

Community engagement using active case finding approach can assist in detecting cases and curtailing transmission and infectivity of TB bacilli. Nigeria over the years has however been unable to attain the global target of 70% case notification rate suggesting the need for more proactive approaches to TB case finding. Additionally, recent findings from the TB prevalence survey in Nigeria in 2012 revealed that 75% of previously undetected cases found during the survey were sputum smear-positive indicating that many cases go unreported and undetected in the community. The intervention was aimed at actively finding TB cases in the community

Objective

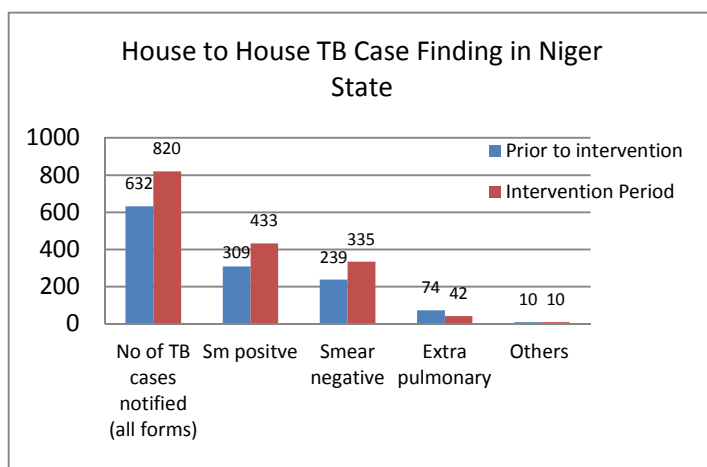
- To create awareness in the community about TB and TB signs and symptoms
- To actively find TB cases in the community and refer them for appropriate treatments

Method

Three Local Government Areas (LGAs) with low TB case notification rates were selected. Through advocacy to the district head, community mapping and identification of community volunteers and Ward Development Committee (WDC) members were selected and trained to suspect TB. A house-to-house screening of community members was carried out using symptomatic TB screening tools. All smear positive TB patients detected were notified and placed on treatment

Results

In all, a total of 6,252 community members were screened over a period of 3 quarters July 2013–June 2014. Of persons screened, 2,921(47%) were found to be presumptive TB cases. A comparison of LGA data before and during intervention showed a yield of 188 all forms of TB cases(29.7%) over baseline figure.



Conclusion

Though there are debates about the yield of house to house screening however there are important lessons learned. The most important benefit is the information shared and increased awareness about TB in communities which is often left behind after the screening exercise might have been completed there by ensuring that the community is better informed. The present study indicates that ICF in communities contribute to improvements in case finding.