

Social Support Program at Indus Hospital PMDT

in collaboration with NTP & PTP

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Indus Hospital DR-TB Control Program



Social Support

- Providing support to create an environment that is conducive to the completion of treatment and cure of the patient

Why is Social Support Necessary?

- Long, intensive treatment
- Serious adverse effects
- Poor socioeconomic factors affect adherence

Strengths of Social Support

- Improve commitment to treatment
- Improve cure rates
- Decrease side effects by nutritional improvement
- Decrease rates of default, treatment failure and death

Components of Social Support

Indus Hospital PMDT

- Counseling
- Food Assistance Program
 - Nutritional Supplementation for special cases
- DOT provision through Treatment Supporters
- Transportation and housing costs for special cases

Why is Counseling Necessary?

- Long, painful treatment
- Disconcerting adverse effects
- Poverty
- Social stigma and alienation
- Hopelessness after previous failed treatments
- Death of a family member
- Guilt and worthlessness
- Special case patients



Emotional Support in Lima, Peru

- Treating MDR TB patients since 1996
- 80% cure rate
- Nurses manage provided emotional support
- Common areas of concern
 - Guilt
 - Stigma
 - Side effects
 - Adherence difficulties
 - Socioeconomic difficulties
 - Death and concurrent illness

Food Assistance Program

Indus Hospital PMDT



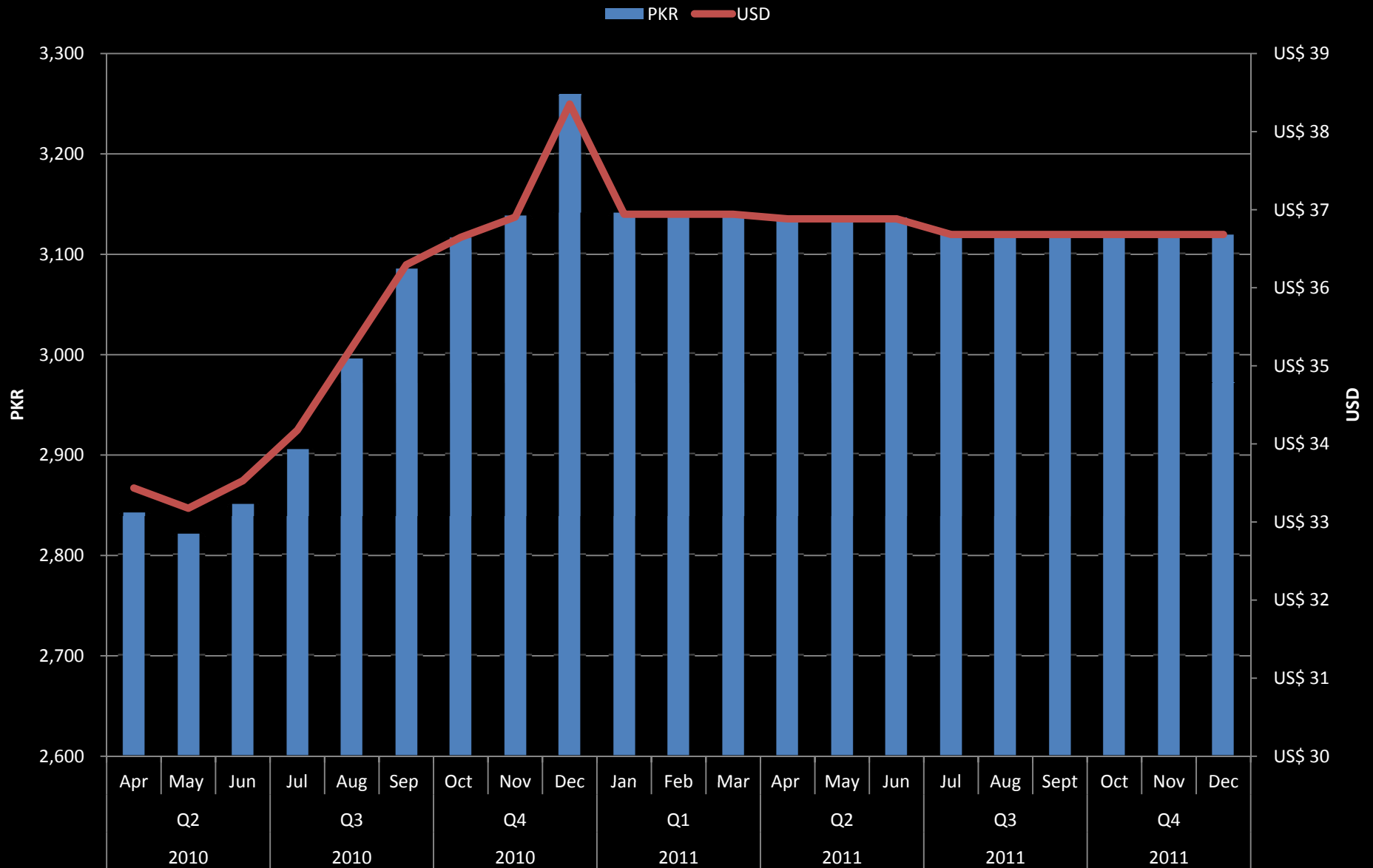
Article	Quantity
Flour	20Kg
Rice	5Kg
Lentils	4Kg
Sugar	4Kg
Oil	5Ltr
Milk	1Kg

Food Assistance Program Advantages

- Provide nutritional benefits
- Incentive to comply with treatment
- Increases 'worth' of patient
- Allows subsistence in the absence of income
- Compliance for follow-up sputum submission and clinical visits

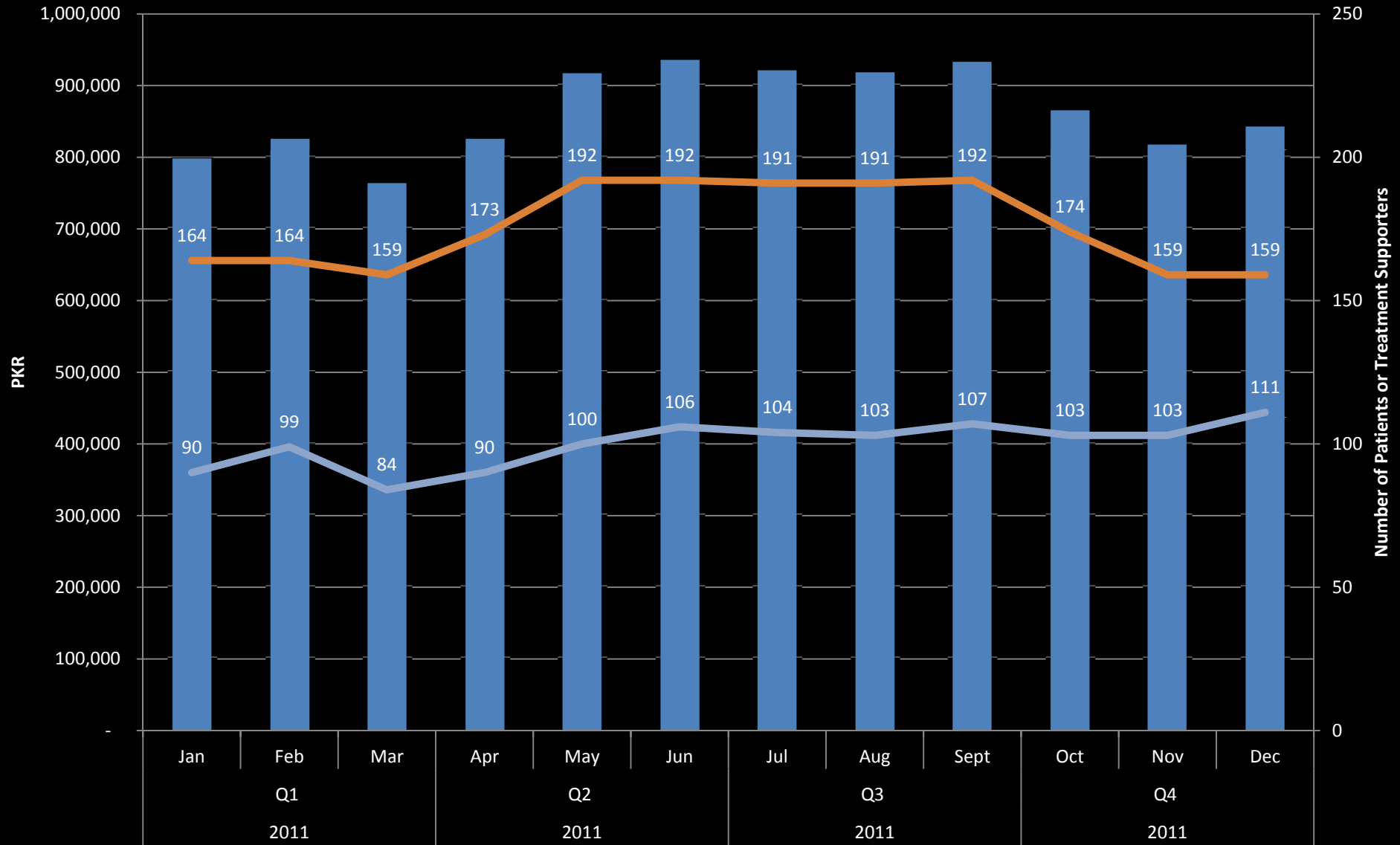
Monthly trend in cost per food basket

March 2010 - December 2011



Monthly Cost of Food Basket Program

■ Projected cost (PKR)
 — Number of patients
 — Number of Treatment Supporters



Nutritional Support for DR-TB Patients

Baseline
Height & Weight
recorded
BMI calculated

Normal BMI
(18-25)

Low BMI
(16-18)

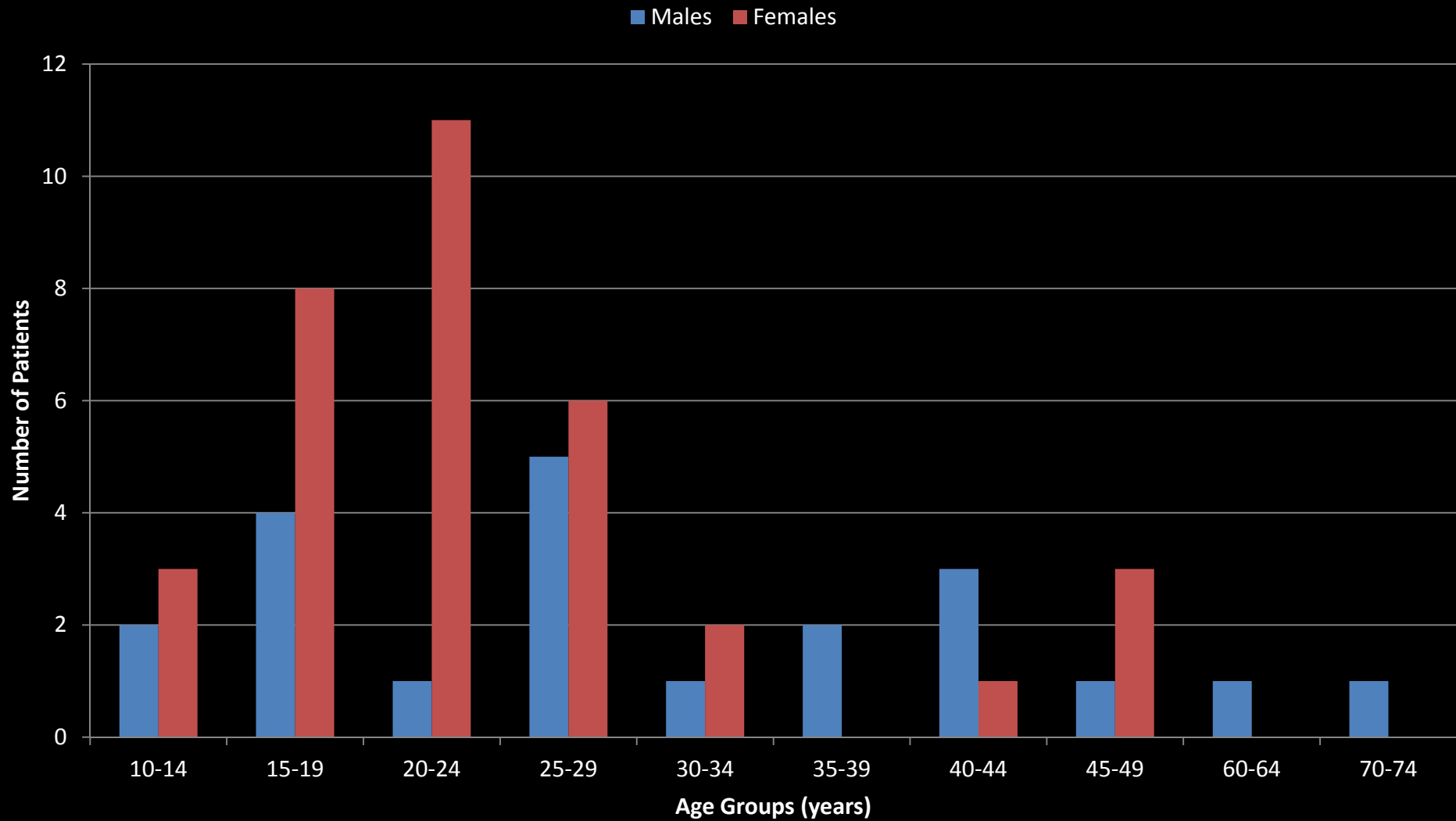
Very Low BMI
(<16)

2 month follow-up

Monthly
Nutritional consult

Monthly
Nutritional Consult &
Nutritional
Supplements

Patients on Power pack by Age and Gender (N=60)



Monthly nutritional supplement cost



Why are Treatment Supporter Necessary?

- Increase compliance
- Identify and report side effects
- Identify potential contacts
- Provide support and some counseling
- Delivery of medication
- Assess transmission risk factors in the household
- Encourage patients to attend their clinical appointments

DOT-Treatment Supporters

- Directly Observed Therapy for Completion of Pulmonary Tuberculosis- Chaulk CP & Kazandjian VA, JAMA. 1998 Mar.
 - DOT with incentives and enablers : 86% - 96%
 - DOT w/o incentives and enablers : 85% - 87%
 - DOT only in part of the therapy: 78% - 82%
 - No DOT: 41% - 82%
- **Conclusion:** *Treatment completion rates for pulmonary tuberculosis are most likely to exceed 90%, when treatment is based on a patient-centered approach using directly observed therapy with multiple enablers and enhancers.*

Additional Support

- Hygiene kits
- Transportation costs
- Clothing and shoes
- Schooling for children
- Improving housing conditions

Challenges

Indus Hospital PMDT

- Treatment supporters
 - Identification for female patients
 - Family vs. community supporters
 - Monitoring
- Counseling
 - Emotionally draining
 - Angry and aggressive patients
 - Separating physiological symptoms from social/psychological ones
- Food Assistance
 - Logistics
 - Supply , procurement & storage of large number of food baskets
 - Intake by patients?
 - Deception by workers

Thank you!