

## National Tuberculosis Control Program in the Philippines

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## Introduction:

The Philippines is listed as one of the 30 tuberculosis (TB) and multidrug-resistant tuberculosis (MDR-TB) burden countries in the world.<sup>(1)</sup> In 2017, the estimated Philippines TB incidence rate was the 3rd highest globally.<sup>(1)</sup>

The National Tuberculosis Control Program (NTP) was established in 1978 and operates within a devolved health delivery system at different levels.<sup>(2)</sup>

In 2017, Philippines NTP notified and treated 55% of WHO estimated TB cases and a 91% treatment success rate was achieved.<sup>(3)</sup> NTP developed the Philippines Strategic TB Elimination Plan 1 (PhilSTEP1) in line with the WHO END TB strategy and is currently implementing activities at different levels according to this strategy.<sup>(2)</sup>

## **Objectives:**

#### To observe and gain a broader knowledge of the NTP in the Philippines.

- 1) To observe each institution's function at district
- 2) To observe how TB control program is implemented at different levels
- 3) To observe the relationship between community level and district / national level institutions





#### Method:

We visited organizations at various levels from community level to national level: [Layte] Tolosa Rural Health Unit; Tolosa Barangay Health Station; Provincial Health Office; Eastern Visayas Regional Medical Centre DOTS clinic; Department of Health Region-8 (DOH R-8); and [Manila] DOH.

Data collection was conducted by using both quantitative and qualitative data collection methods. Interviews and open discussions with NTP representatives at all levels were conducted to collect qualitative data. As for the quantitative method, secondary data was utilized, which included the number of notified new TB cases and DOTS coverage rate.

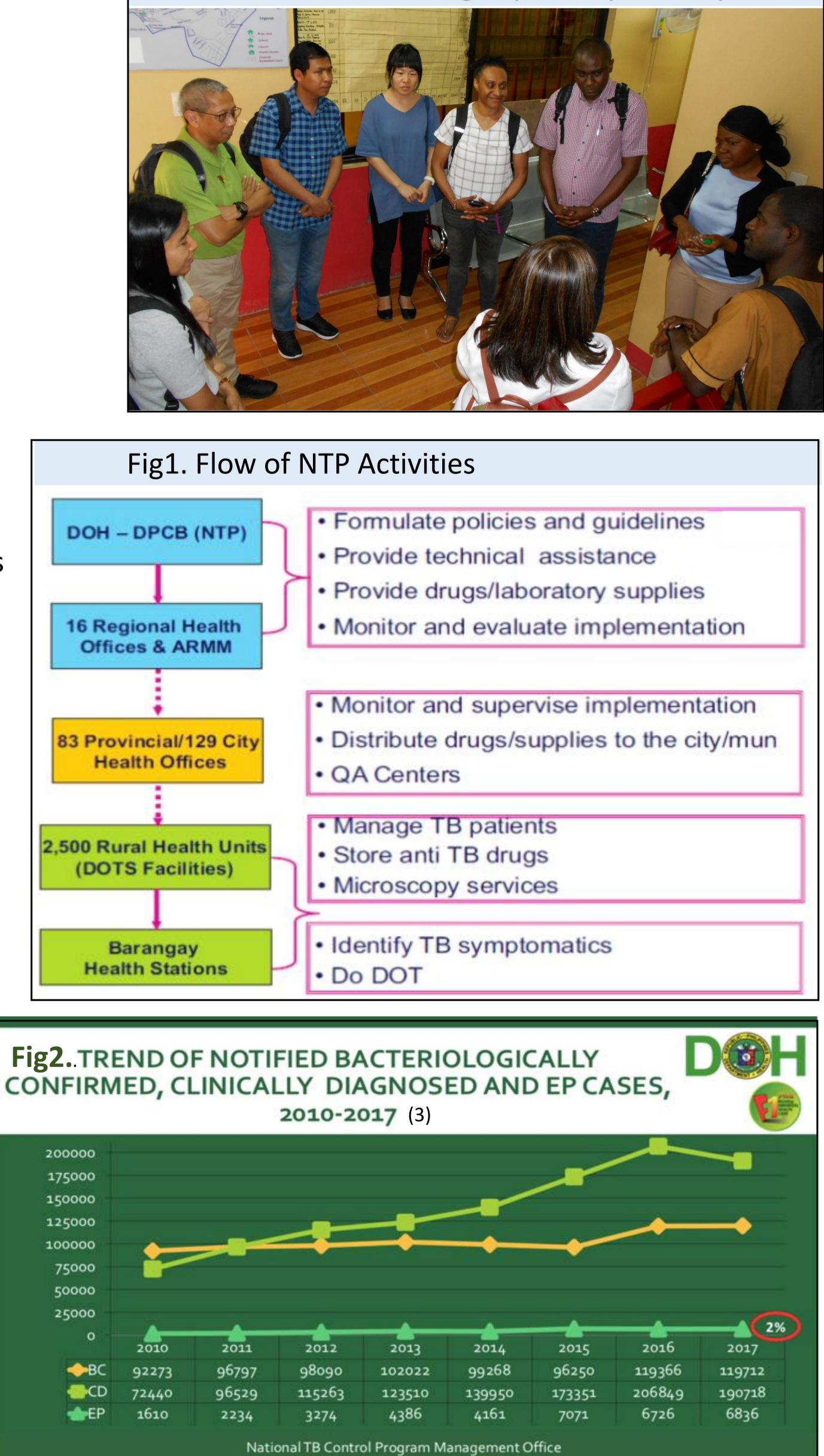
## **Observing and finding:**

#### 1) Achievement of NTP in the Philippines<sup>(2)</sup>

Even though the bacteriologically confirmed rate is still stable, the proportion of clinically diagnosed (CD) has dramatically increased, which means community awareness may have risen as well.

## 2) Health education and promotion related to TB in the Philippines

At the national level, NTP have engaged with other ministries and developed the 2016-2020 communication plan. The NTP's Health Promotion Strategy and Media Broadcasting Program were Old Balara health center, group activity 14<sup>th</sup> May. 2019



scheduled to be launched in April 2019.

#### 3) **Community DOTS** approach

At the national level, NTP provides training for health care providers to deliver proper DOTS to patients in line with the WHO recommendations. NTP also collaborates with community-based organizations and other private sectors.

# 4) Notification of TB cases from the community level to the national level (Reporting Flow)

NTP gathers reports quarterly from all levels and has a case based electronic recording and reporting (R&R) system for both drug sensitive and resistant TB.

5) Integration of NTP, a vertical program, in the horizontal services

In the Philippines health system, the TB program is integrated into district/ provincial/ regional/ private hospitals and clinics.

## **Strengths and Challenges:**

- \* Dedicated and motivated Barangay Health Workers (BHWs)
- \* BHWs bridge health facility and community relations
- \* Multisectoral cooperation for TB care and prevention between NTP

and other ministries/community organizations

- ^ High loss to follow up rate for MDR-TB patients
- ^ Need to intensify active case finding and contact tracing to reduce the number of missing cases

## Conclusion

Exposure to the overseas field trip and the opportunity to learn about Philippines' NTP was a great experience. We could learn not only about the achievements, but also the strengths and challenges to conduct NTP in the Philippines. Likewise, we could learn the important roles of community health volunteers in implementing NTP activities. This knowledge will be useful for our future in the field.

### Acknowledgements

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#### References

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#### **Disclosure of conflicts of interest**

The authors declare no conflicts of interest associated with this manuscript.