



AAA MITIGATION MEASURES ON TUBERCULOSIS AND COVID-19

Background information

AAA implements TB and TB/HIV collaborative activities in close collaboration with the NTP, MOH of South Sudan. Its presence is felt in 21 counties and 5 States i.e Western Equatoria, Northern Bahr-el-Ghazal, Warrap, Lakes and Western Bahr-el-Ghazal States.

With the emergency of the novel Coronavirus pandemic in South Sudan which has affected all the states that AAA operates in, the AAA management decided to come up with some basic guidelines on what to be done when implementing TB services in the midst of this COVID-19.

Introduction

Tuberculosis and COVID-19. Tuberculosis (TB) is the world's biggest killer among infectious diseases, claiming more than 4000 lives each day. The unprecedented corona virus pandemic seriously impacts people with pre-existing health conditions. People who have TB are usually more vulnerable to other infections, including the novel corona virus, due to pre-existing lung damage. They are at a higher risk of developing complications from COVID-19. Therefore it is important that health care providers follow some simple risk management measures when at their places of work.

COVID-19 affects different people in different ways. Most infected people will develop mild to moderate illness and recover without hospitalization.

Most common COVID-19 symptoms:

- Fever
- Dry cough
- Tiredness

Less common symptoms:

- Aches and pains
- Sore throat
- Diarrhea
- Conjunctivitis
- Headache
- Loss of taste or smell
- A rash on skin, or discoloration of fingers or toes

Serious symptoms:

- Difficulty breathing or shortness of breath
- Chest pain or pressure
- Loss of speech or movement

Measures to be taken by people with TB to reduce their risk for COVID-19:

- Social distancing with "reverse-quarantine": Remain at home and avoid contact with people as much as possible.
- TB unit visits should be limited to those that are essential eg drug refill, sputum follow-up examinations etc
- Wash hands frequently with soap and water.
- Don't touch face, nose, and eyes with unwashed hands.
- Avoid close contact with those who are unwell.
- Strictly adhere to your TB treatment.
- Avoid hospital visits as much as possible and keep in touch with your doctor/nurse/health facility by phone.
- Use masks, and take extra caution to maintain hygiene such as - disinfection of hands, used surfaces, proper disposal of used tissues, etc.

TB program needs to:

- Ensure proper communication is maintained with people affected by TB and all stakeholders using virtual means of communication.
- Secure multiple months of TB medicines are made available at the homes of people on TB treatment

- Use appropriate digital adherence/support tools according to the local context.
- Ensure people with TB receive necessary psycho-social, nutritional, economic support.
- Maintain 2 m apart- physical distance between patients and between patients and health staff
- Conduct Intensified Health Education on COVID-19, so as to correct misconception
- Provide health education on COVID-19 and handwashing practices
- Ensure TB care providers are well briefed and use essential personal protection equipment.
- Switch to treatment for drug-resistant TB which is injection free. Ensure systems are in place for remotely monitoring of side effects and minimizing hospital visits.
- Maintain uninterrupted TB drugs supply

TB Activities (health education, capacity building, outreaches, home visits, meetings)

- Deal with small groups of people at a time
- If possible, take temperature to all members of the group to rule out presumptive COVID-19 cases
- Educate and refer any presumptive COVID-19 case to the competent health personnel

Special attention is required for health care workers. They are the frontline against TB and COVID-19. They must be protected and supported to ensure they can undertake their job safely and effectively.