

2ND QUARTER REPORT

ON

MASS DRUG ADMINISTRATION (LF)
&
TEST & TREAT PROJECT

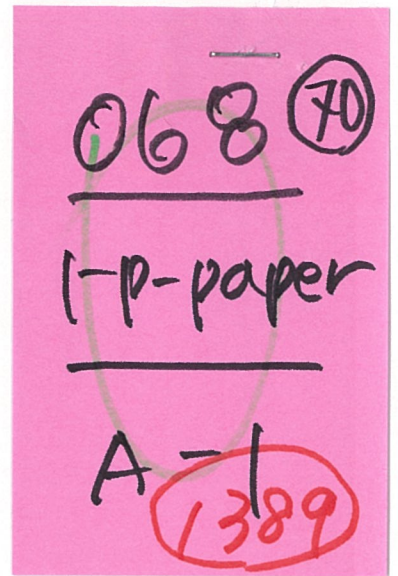
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DATE SUBMITTED: 19/07/2012

SUBMITTED TO: A/NACD



Test & Treat Progress

1.0 Introduction

In April 2012, the T&T team was deployed again to the expansion islands of Batiki, Nairai and Gau for a follow up on the individuals yet to be tested. With the inclusion of the FCCDC Health Inspector, she addressed the vector component of the LF program by capturing adult mosquitoes for testing of microfilaria presence in an overseas laboratory.

The team concluded its 4th phase of follow up treatment on the first 5 islands namely Beqa, Moturiki and Koro in May and June. Thus, the existing ICT positives were determined. Also in May, the remaining island to be tested from the expansion islands, Wakaya was visited and all the individuals present were tested. As for the island of Lakeba and the Navo ICT positives (TAS), the DNs continued treating the LF cases with their dosage of the LF drugs.

At the completion of each trip, the project assistants were engaged in data entry on results gathered.

With MDA, the team visited the Northern Division and Central conducting meetings with the SDHIs in regards to the 2012 MDA. The team has been divided to cover each component of the "1 Day Program" such as communication, human resources, logistics and finance.

The team is on its planning stage and conducting Intersectoral meetings with relevant counterparts that can assist in the achievement of this new strategy.

The objective of this 2nd quarter was to: (a) continue treatment of the LF cases on its 2nd and 3rd phase; (b) conduct testing on the expansion islands; (c) compile a database for all tested and treated.

The expected outcome of the project was to compile a holistic report of the LF situation in the Eastern Division as it has been identified to have a high prevalence rate of LF therefore to facilitate the formulation of an encompassing proposal to expand the programme to the remaining islands and the follow up of individuals detected from the surveys after this years MDA.

This report outlines the activities conducted to fulfill the objectives of the 2nd quarter for T&T.

2.0 Method

The T&T project team conducts its program following the guidelines drawn up by the Ministry of Health with WHO. It has expanded its task with the inclusion of the vector component so that it encompasses the entire structure that causes LF.

3.0 Results

3.1 Secondary Information:

3.1.1 Expansion Islands:

In the 1st phase, 2 islands namely Wakaya and Makogai proved no ICT positive therefore declared free from LF. Batiki and Nairai both have 16 ICT positives while Gau has 99 cases. These positives will be treated every 2 months with the two MDA drugs i.e. 6mg/kg DEC and 400g Albendazole.

3.1.2 First 5 Islands:

Beqa, Moturiki and Koro have concluded its 4th phase with the testing of the existing positives, the results were;

LOCALITY	# OF ICT +VES TESTED	# OF ICT +VES CURED	# OF ICT +VES REMAIN
BEQA	72	42	30
MOTURIKI	10	7 1-Deceased	2
KORO	16	14	2
TOTAL	98	63	34

3.1.3 Lakeba & Navo Community:

Each District Nurse continued treating the ICT positives i.e. 49 in Lakeba and 3 in Navo.

3.2 Primary Information

3.2.1 Observations

3.2.1.1 Expansion Islands:

T&T was conducted better in the expansion islands as the team is now familiar with the program. We were able to cover the 4 islands in one trip with the utilization of the Levuka sub-divisional vessel. However, challenges faced during the program were;

a) Vector

The presence of mosquitoes in the islands of Batiki, Nairai and Gau is felt both during the day and night especially early in the morning and just before dawn.

b) Environment

The islands are close to each other and people frequently travel from an island to another to attend to ceremonies or gatherings could be a method of transporting the vector.

c) Individuals

Many have a fair idea of the disease and its effect since their grandparents however are not encouraged to enhance their living standard by maintaining good sanitation, clean environment etc.

3.2.1.2 First 5 Islands

a) Reception on T&T

The community is now well versed with the program and some who were not present since 2010 request for test. It indicated the effectiveness of the awareness conducted whereby each individual is aware of the disease.

b) Treated Cases

These are the individuals who will continue to share their feelings of happiness when being informed free of LF.

4.0 Discussions and Recommendations

The T&T program under the LF Unit has proved that it can declare Fiji free from LF by 2018 by targeting the islands. The results signifies a drastic decrease on the 1st 5 islands with only 34 cases remaining.

Test and Treat

- **Aim:** Mass screening to detect all ICT positive cases in population $\leq 10,000$ with ACTIVE FOLLOW UP and treatment of all positive cases until they turn ICT negative.
- **Use:** Countries with a population $\leq 10,000$; OR endemic regions or islands within a country that have a population $\leq 10,000$
- **Targets:** Test 100% of the population, with 95% being the minimum acceptable level.
- **Follow up:** Quarterly treatment (i.e. every 3 months) of all positive cases and re-test yearly

Why Test and Treat?

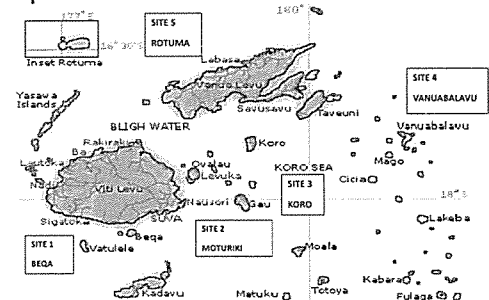
- **Why Test and Treat?**
 - Ensure compliance
 - Can eliminate remaining foci of infection of non-compliant groups
 - Accelerated conversion?

Different ways of implementation

	ICT Target Age	Coverage	Follow up ICT	Responsible	Time to Complete Test only
Fiji	>0	95%	Everyone	Project officer (TF)	½ year
Tuvalu	>2	70%	Only positives	NFP+Local	1 ½ years
Kiribati	>2	50%	N/A	Local	1 ½ years

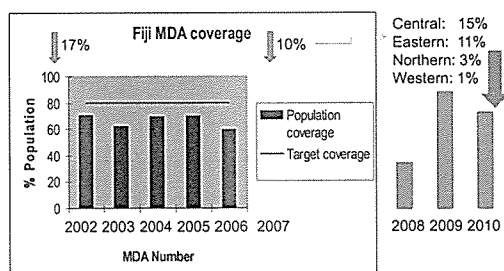
Background-Fiji

□ Fiji Phase I islands



Progress-Fiji

Previous surveys and MDAs



Progress-Fiji

ISLAND	TOTAL	MDA TREATED	NOT TREATED	ICT TESTED	NO ICT	ICT +VE	MF +VE	ICT %
BEQA	1139	1118	21	1138	1	133	12	11.69%
MOTURIKI	827	799	28	820	7	73	3	8.90%
KORO	3087	2804	283	2892	195	140	5	4.84%
VANUA-BALAVU	1916	1701	215	1779	137	78	6	4.38%
ROTUMA	1809	1734	75	1775	34	193	19	10.87%
TOTAL	8778	8156	622	8404	374	617	45	7.6%

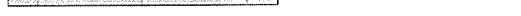
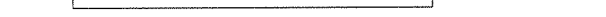
Progress-Fiji

ISLAND	TOTAL	MDA TREATED	NOT TREATED	ICT TESTED	NO ICT	ICT +VE	MF +VE	ICT %
BEQA	1221	1169	52	1221	0	72	1	5.90%
MOTURIKI	777	719	58	752	25	10	0	1.33%
KORO	2933	2846	87	2933	0	16	0	0.55%
VANUABALAVU	1728	1634	94	1657	71	13	1	0.78%
ROTUMA	1996	1860	136	1862	134	52	1	2.79%
TOTAL	8655	8228	427	8425	230	163	3	1.9%

Questions-Fiji

- **It is feasible but expensive**
 - 6 Full time staff (1 project officer + 5 assistants)
 - All the tests were conducted by these staff who travelled to the islands either by boats or planes
 - Test everyone for 2 times (pre and post) including children < 2years old
 - Tremendous amount of time and resources
 - Compete with the national filariasis program for resources
 - Op cost per person: 6.6 USD (vs MDA cost 15-20 cents)

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Questions-Tuvalu

It works but it is slow

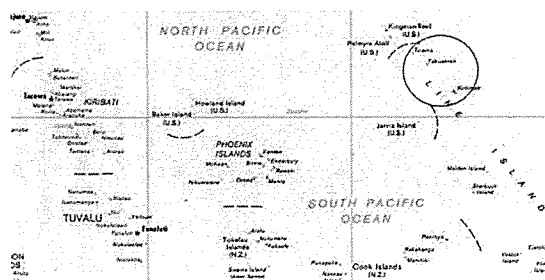
- Still, 1/3 of ICT positives remain as positive after 4-5 years and around 30% of initial positives are LTFU or dead
- Discrepancy between the results from 1st and 2nd test?
 - 6.3% would be more realistic
- 70% of reduction could have yielded or not?

Pre	Post
6.3%	??
3.5%	1%

- How long should we follow up positive cases?
- It took 2 years to complete instead of 1 year.

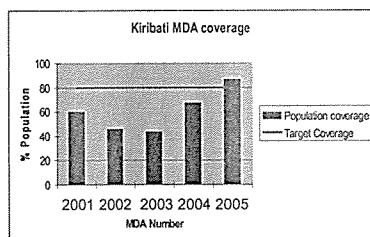
Background-Kiribati

Christmas Islands, 3 inhabited, 10,000~



Progress-Kiribati

Previous surveys and MDAs



South Tarawa: 2.2%
North Tarawa: 0.5%
Christmas Islands: 1.5%

2007

Initial test-Kiribati

	October 2010				Feb/October 2011		
Location	Tested	Positive	Rate	Population	Tested	1st Pos	Rate
Tabuaeran	1662	341	20.5%	1960	788	13	1.7%
Teerania	1166	936	80.3%	1690	618	39	6.3%
Christmas	4295	1387	32.3%	5586	3390	56	1.7%
Total	7123	2664	37.4%	9230	4796	108	2.3%

Questions-Kiribati

☐ It does not work very well- expensive and slow

- ☐ It took 2 years only to complete initial tests
- ☐ Currently treatment of cases are supposed to be going on since Nov 2011(not sure)
- ☐ Logistic/communication challenges are overwhelming
 - one of the remotest area in the world
 - very limited internet access
- ☐ Tremendous amount of resources have been invested
- ☐ How long should we follow up positive cases?
- ☐ The program prefers to conduct MDA

