

INTRODUCTION OF URINE LF-LAM TEST IN SA



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Criteria for the use of LAM



- HIV positive patients with low CD4 count (less than or equal to 100 cells/ μ L), or
- HIV positive patients who are seriously ill, regardless of CD4 count, or
- HIV positive patients who are seriously ill and have low CD4 count

Based on the criteria above a decision to use the test in hospitals was made. This was based on the fact that most of these patients will present or referred to the hospitals.



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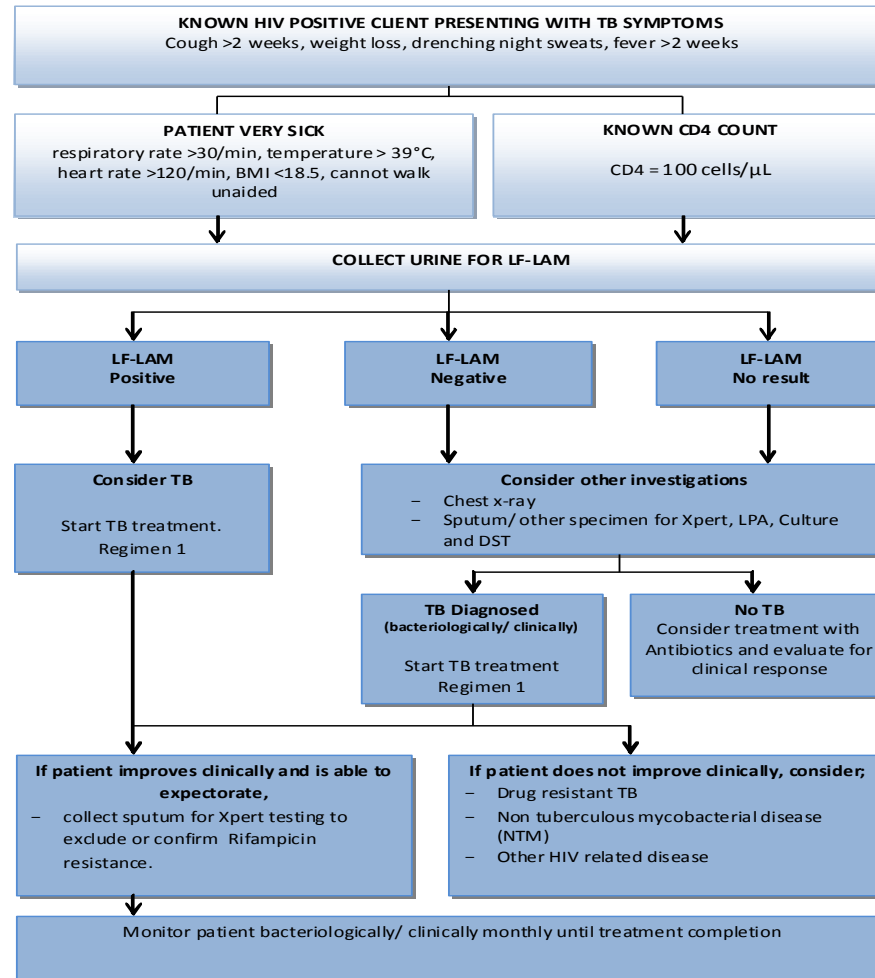
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Diagnostic Algorithm



LF-LAM IN THE DIAGNOSTIC ALGORITHM



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Planning for roll out



- Pilot conducted in 5 hospitals to determine the feasibility of the use of LAM in these settings and test the diagnostic algorithm
- Revision of the algorithm and guidelines
- Development of training materials
- Road shows to increase awareness
- Training of health care professionals – nurses and doctors
- Development and dissemination of job aides



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Planning for roll out



- Quantification and costing
 - Could only use the CD4 data to estimate number of patients that will need the test
- Procurement processes
 - Engagement of supply chain management
 - Development of item codes
 - Mobilisation of funding for procurement of tests
 - Conditional Grant
- Monitoring and Evaluation
 - Modification of the data collection tools
 - Patient records, TB Patient Identification Register, paper based TB Register, Electronic TB Register



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Quantification and costing



ASSUMING A 3% REDUCTION IN CD4 TEST VOLUMES FROM 2016 (BASED ON TREND)

| Province | CD4<100 in 2016 | Assume 3% Reduction | Expected CD4<100 in 2017 | Unit Cost per test (Rands) | Total Costs (Rands) |
|---------------|-----------------|---------------------|--------------------------|----------------------------|----------------------|
| Western Cape | 21 821 | 654.63 | 21 166 | 46.50 | 984 219.00 |
| Eastern Cape | 37 422 | 1122.66 | 36 299 | 46.50 | 1 687 903.50 |
| Gauteng | 87 695 | 2630.85 | 85 064 | 46.50 | 3 955 476.00 |
| North West | 24 664 | 739.92 | 23 924 | 46.50 | 1 114 326.00 |
| Free State | 18 487 | 554.61 | 17 932 | 46.50 | 833 838.00 |
| Limpopo | 30 470 | 914.1 | 29 556 | 46.50 | 1 374 354.00 |
| Mpumalanga | 33 467 | 1004.01 | 32 463 | 46.50 | 1 509 529.50 |
| Northern Cape | 6 624 | 198.72 | 6 425 | 46.50 | 298 762.50 |
| KwaZulu-Natal | 80 156 | 2404.68 | 77 751 | 46.50 | 3 615 421.50 |
| Total | 340 806 | 10224.18 | 330 582 | | 15 373 830.00 |



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Key issues for consideration



- Placement of the test within the hospital
 - In all OPD and wards for easy access
 - Packaging (100s per box) inconvenient resulting in “re-packaging”
- Onsite supervision and support
- Change management
 - Some clinicians did not act on the results preferring to wait for Xpert/ culture results
- External quality control programme needs to be developed



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Key lessons



- It is feasible to implement the LF-LAM in hospital settings
- Need champions in hospitals to drive this
- Need to sustain the momentum through mentoring and supervision



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Thank you



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