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**Title:** HIV-TB national program integration- 4 year experience at tertiary care hospital

Dr. T.K. 14703 Jayalakshmi jaiclinic@gmail.com MD , Dr. Aparna 14704 Iyer draparna1981@gmail.com MD , Dr. Girija 14705 Nair girijapn@hotmail.com MD , Dr. Aditya 14706 Agrawal adiagra@gmail.com MD and Dr. Kartik 14707 Chauhan drkartik.chauhan@gmail.com MD . <sup>1</sup> Pulmonary Medicine, Dr. D.Y. Patil Hospital, Medical College and Research Centre, Navi Mumbai, Maharashtra, India, 400706 .

**Body:** Background: In India guidelines for integration between National AIDS Control Program and Revised National Tuberculosis Control Program were formulated in 2009.<sup>[1]</sup> Aims: 1. Determine proportion of patients referred from Integrated Counseling and Testing Center (ICTC) to DOTS center. 2. Determine proportion of HIV–Tuberculosis co-infection. Method: Retrospective analysis of 4 year records (2009–12) at the ICTC center of a tertiary care hospital in Navi Mumbai, India was done. Results: 11321 (59.2% male, 40.7% female, 0.01% transgender) patients underwent HIV testing over 4 years. 316 (2.7%) patients tested positive for HIV. 22 (6.9%) were co-infected with TB. 17/22 (77.2%) had acid fast bacilli in sputum.

The ICTC centre referred 930 (8.2%) of their clients to DOTS center. Of these, 24.4% were HIV positive. 9.6% HIV positive and 9.9% HIV negative chest symptomatic patients referred to DOTS were diagnosed with TB. Trends :

Table1: Trends 2009-2012

Year	Total clients tested	HIV pos	% HIV pos	HIV-TB co-infection	% Coinfection	% referred to DOTS centre
2009	1347	66	4.8%	2	3%	5.1%
2010	3373	115	3.4%	7	6%	9.3%
2011	3809	100	2.6%	11	11%	9.6%
2012	2792	80	2.86%	2	2.5%	6.4%

**Conclusions:** 1. 8.2% of total ICTC clients were referred for detection of TB. 2. 2.7% of total ICTC clients tested were HIV positive. 6.9% of HIV patients had TB, 77.2% were sputum positive. Ref: 1. National framework for joint HIV/TB collaborative activities: <http://tbcindia.nic.in>.