

# **Summary Report: Sentinel Project Training, Chennai, India**

Dates: 17-19 June 2013

Sponsors: National Institute for Research on TB (NIRT), India; World Health Organization, Geneva, Switzerland; Sentinel Project, Boston, USA

Total Participants: 48, primarily pediatricians from the public, private, and university sector, including all states of India and Nepal. Director of the Revised National TB Control Program (RNTCP) and Health Secretary of Tamil Nadu attending. MSF Mumbai also attended.

Other activities: Demonstration of gastric lavage by Dr. Carlos Perez

Overall comments: The course was well received by participants and all participants were engaged actively in the program. There was lively discussion and debate on both clinical and policy issues. Active participation by attendees was crucial in making workshop successful.

Areas for improvement:

- 1) Participants expressed a need for more clinical case discussion and to see actual cases on the wards;
- 2) There was a need for better coordination between the workshop organizers prior to the start of the workshop;
- 3) There was a somewhat unclear focus of the meeting (i.e. was it to train clinical providers? Was it to discuss policy issues?). Some interplay in these areas is needed, but it was felt that the different sponsoring groups had different ideas of the workshop goals;
- 4) There was limited participation by members of the RNTCP;
- 5) Some of the lectures need to be better streamlined and coordinated.

Workshop Outcomes

1) Two key policy recommendations were made by the group to the Director of the RNTCP which could greatly impact children with MDR-TB. These were:

- 1: To replace smear microscopy with GeneXpert as the initial diagnostic test in children ages 5 years and under and
- 2: Currently RNTCP guidelines allow ONLY for the treatment of children with CONFIRMED MDR-TB. This group recommended that children with probable MDR-TB but without culture confirmation be allowed to be started on treatment for MDR-TB.

These recommendations will be made and detailed operational plans developed by the Indian Pediatric TB Working Group at their July, 2013 meeting;

- 2) Training of 48 providers in the management of MDR-TB in children, including gastric lavage;
- 3) A list of key challenges, proposed solutions, and potential operational research projects around management of children with MDR-TB was generated. NIRT and the RNTCP have funding for operational research, and Sentinel Project mentors will work national teams to develop proposals and plans. This work could be tied in with the IUATLD Operational Research Programs in the future;
- 4) There are cohorts of children being treated for MDR-TB throughout the country at different hospitals. Sentinel Project mentors will work with Indian colleagues to analyze and publish their data (more than 310 total cases from 3 sites so far);
- 5) A follow-up visit was made to Agra by Dr. Carlos Perez to visit an MDR-TB Center where more than 30 children are being treated for MDR-TB (June 20-22, 2013). The visit was sponsored by Dr. Rajeshwar Dayal who is Head of Pediatrics at the S.N. Medical College was National Vice President of the Indian Academy of Pediatrics in 2011.
- 6) The WHO representative (Fraser Wares) expressed great satisfaction with the workshop and would like to host another one either later this year or early next year depending on their funding. This will be discussed with WHO and Sentinel staff to choose both a time and the country where training will be done. WHO is very supportive of this workshop and would like to be able to attend future workshops.
- 7) Further research projects with MSF-Mumbai will be ongoing, with a focus on qualitative work among the MSF project for patients with MDR-TB and HIV who live in the slums.