

DEMOCRATIC REPUBLIC OF THE CONGO

**85% Policy
Alignment**

• **42,000** children estimated to have fallen ill with TB in 2022ⁱ

• **22%** of children with TB estimated to have missed out on diagnosis and treatmentⁱⁱ

INTRODUCTION

As part of the Test, Avoid, Cure TB in Children (TACTiC) project, Médecins Sans Frontières (MSF) has conducted a survey of paediatric TB policies across 14 countries.

The Democratic Republic of Congo (DRC) has a high burden of TB, multidrug-resistant TB (MDR-TB) and TB/HIV co-infection. MSF continues to run some of its largest programmes in DRC, working in 19 out of the country's 26 provinces to respond to the devastating effects of violence and other health emergencies. This includes efforts to improve the diagnosis, prevention and treatment of TB in children.

This factsheet compares current paediatric TB policy and implementation in the DRC with the most recent World Health Organization (WHO) guidelines, celebrating progress and highlighting areas for improvement. The national TB programme (NTP), ministries and partners should use these findings to develop national paediatric TB roadmaps that set out a clear strategy for ending TB in children.

DIAGNOSIS



National guidelines on the diagnosis of paediatric TB in the DRC are in line with WHO's best practice recommendations, recommending stool sample testing, including evidence-based diagnostic algorithms and enabling children to be enrolled on TB treatment without confirmatory tests. However, with WHO data suggesting that a quarter of children with TB never access diagnosis or treatment, implementation gaps remain a major concern.

PREVENTION



The DRC's national guidelines on paediatric TB prevention are in line with WHO's best practice recommendations, including by offering two shorter TB preventive treatment regimens (3HP and 3HR) to children under the age of 5 who are household contacts of an adult with TB disease, and to children living with HIV. The guidelines also allow these vulnerable children to be enrolled on preventive treatment without a positive interferon-gamma release assay or tuberculin skin test.

TREATMENT OF DS-TB



National guidelines on the management of paediatric drug-susceptible TB (DS-TB) are in line with WHO recommendations, with a shorter 4-month regimen offered to children with non-severe TB. The NTP also reports that they procure paediatric formulations of key medicines, including those needed for the 4-month regimen. Ensuring more children are able to benefit from these recommendations should be a priority.

TREATMENT OF DR-TB



National guidelines on the management of drug-resistant TB (DR-TB) are somewhat in line with WHO's best practice recommendations, offering all-oral regimens for children with DR-TB regardless of age or HIV status. However, because the NTP reports not procuring any paediatric formulations of DR-TB medicines, young children are unable to benefit from these recommendations in practice. Urgent efforts are needed to address these barriers and ensure the national guidelines become a reality.

GLOBAL CALL TO ACTION: TEST, AVOID, CURE TB IN CHILDREN

WHO estimates that 1.25 million children under the age of 14 fall ill with TB each year around the world. Only 51% of these children are diagnosed and reported to NTPs, including just 40% of children under the age of 5 and 20% of children with drug-resistant TB. As a result, a child dies from TB every 3 minutes despite the disease being curable.

While there is an urgent need for better diagnostic tests and treatments for TB in children, these findings demonstrate that DRC's and other countries are not yet making the most of the tools already at

our disposal. Last year, world leaders pledged to accelerate the global fight against TB. Governments, with support from national and international partners, must act now to ensure they don't leave children with TB behind.

To find out more about the policy survey and what steps governments, as well as funders and global health actors, can take to test, avoid and cure TB in all children, visit <https://msfaccess.org/tactic-test-avoid-cure-tb-children>.

ⁱ WHO TB incidence estimates disaggregated by age group, sex and risk factor. CSV file. Available at: <https://www.who.int/teams/global-tuberculosis-programme/data>

ⁱⁱ WHO Global TB Report 2023. Available at: <https://www.who.int/teams/global-tuberculosis-programme/tb-reports/global-tuberculosis-report-2023>