TACTiC Policy Survey | Country Factsheet

THE PHILIPPINES

- **74,000** children estimated to have developed TB in 2022ⁱ
- **56%** 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 Philippines has a high burden of TB, multidrug-resistant TB (MDR-TB) and TB/HIV co-infection. MSF teams have been working to provide general and mental health care to people displaced and affected by armed conflict and natural disasters. In 2021, MSF launched a new TB project in the densely populated and impoverished Tondo area of the capital Manila, including efforts to improve the diagnosis, prevention and treatment of TB in children.

This factsheet compares current paediatric TB policy and implementation in The Philippines 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 TB in children are currently not in line with WHO recommendations. These guidelines should be amended to include protocols that enable healthcare workers to start children who are very likely to have TB on treatment on the basis of a clinical diagnosis alone, WHO treatment decision algorithms and the testing of stool samples. Operational research may be a worthwhile approach in the interim. With more than half of children missing out on TB diagnosis and treatment in the Philippines, addressing these gaps should be an urgent priority.

PREVENTION



64% Policy

Alignment

National guidelines on the prevention of TB disease in children are in line with WHO recommendations, recommending shorter TB preventive treatment (TPT) regimens for children under the age of 5 who are close contacts of a person with TB and for children living with HIV. These vulnerable children also do not need a positive interferon-gamma release assay or tuberculin skin test before being offered TPT. This is encouraging, and the Philippines could further strengthen its prevention efforts by procuring dispersible forms of treatment for children under the age of 5.







TREATMENT OF DS-TB

National guidelines and practices on the management of drug-susceptible TB (DS-TB) in children are partially in line with WHO recommendations. While the guidelines include a 4-month regimen for children with non-severe forms of DS-TB, The Philippines is not procuring all the paediatric formulations required to treat children with DS-TB. This leaves healthcare workers no option but to crush adult formulations, leaving children exposed to under- or overdosing of drugs, which can lead to a high risk of drug resistance or increased side effects.

TREATMENT OF DR-TB



National guidelines on the management of drug-resistant TB (DR-TB) in children are fully aligned with the most recent WHO recommendations. This includes recommending all-oral regimens for all children regardless of age and procuring paediatric formulations of all drugs required to build an effective DR-TB treatment regimen. While this should be welcomed, outdated diagnostic guidelines and ongoing implementation challenges mean that very few children are benefitting from this high standard of care.

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 drugresistant 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 the Philippines 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 <u>https://msfaccess.org/tactic-test-avoidcure-tb-children</u>.

¹WHO TB incidence estimates disaggregated by age group, sex and risk factor. CSV file. Available at: <u>https://www.who.int/teams/global-tuberculosis-programme/data</u> [#]WHO Global TB Report 2023. Available at: <u>https://www.who.int/teams/global-tuberculosis-programme/tb-reports/global-tuberculosis-report-2023</u>

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