NATIONAL TB
ELIMINATION PROGRAMME

Central TB Division
Ministry of Health & Family Welfare
Untreated TB case can transmit disease to at least 10 to 15 people in a year.

Contacts of an active case are at 10 to 60 times higher risk of developing the disease.
TUBERCULOSIS

APPROPRIATE BEHAVIOUR

- Appropriate use of mask
- Covering mouth with a handkerchief while coughing or sneezing
- Hand washing after coughing or sneezing
- Maintaining good nutritional status
- Adequate ventilation in households and workplaces
Tuberculosis is (India)-
- Leading cause of death among communicable diseases
- 5th leading cause of death among all diseases

Estimated Case Fatality Rate for TB is 17% (2019)

Deaths attributed to disease

Source: IHME, Global disease burden (2019)
TB DISEASE BURDEN IN INDIA

- Estimated incidence rate of TB 193 cases / lakh population
- Estimated TB cases in 2019 in India 26.4 lakh
- Reported TB cases 24 lakh (2019) 18 lakh (2020) 12.8 lakhs (So far-Aug’21)

- 2% HIV-Positive
- 2.5% Drug Resistant
- 65% 15-45 years (Age)
- 33% Urban
- 58% Rural
- 9% Tribal

Men 62%  Women 38%  Children 6%
1962
Govt. of India launched the National TB Program and set up District TB Centres

1993
WHO declares TB as a global

1997
GoI revised NTP to RNTCP – introduction of DOTS (Directly Observed Treatment Short course)

2005 – 11
Second phase of RNTCP – Pan India coverage and improved quality and scale up of services

2012 -17
National Strategic Plan (2012 -17) - mandatory notification of TB, rapid molecular testing, active case finding and integration of the program with National Health Mission

2017 – 25

2020
In January 2020, GoI revised RNTCP to National TB Elimination Program (NTEP)

2021
TB Mukt Bharat Abhiyaan

TB Mukt Bharat Abhiyaan
India’s commitment to End TB by 2025, five years ahead of the global SDG target.

18 State/UTs – committed and developed state-specific strategic plans.
Current rate of annual decline: 3 %
Required rate of annual decline: 15 %
## ROAD TO REALIZE TB FREE VISION

### Scenario 04: SDG Population prevention and infection control

<table>
<thead>
<tr>
<th>Scenario</th>
<th>01</th>
<th>02</th>
<th>03</th>
<th>04</th>
</tr>
</thead>
<tbody>
<tr>
<td>Presumptive TB Examination rate / lakh population/year</td>
<td>600</td>
<td>1200</td>
<td>1800</td>
<td>2400</td>
</tr>
<tr>
<td>Notification / Estimates</td>
<td>85%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>LTBI (% coverage of targeted population)</td>
<td>15%</td>
<td>48%</td>
<td>70%</td>
<td>90%</td>
</tr>
<tr>
<td>PPSA (districts with interface agencies for private sector engagement)</td>
<td>150</td>
<td>350</td>
<td>400</td>
<td>600</td>
</tr>
<tr>
<td>Introduction of vaccines and non-health interventions like undernutrition, poverty, living conditions, etc</td>
<td>-</td>
<td>+</td>
<td>+</td>
<td>++++</td>
</tr>
</tbody>
</table>

With upscaling interventions to their fullest capacity, we may achieve incidence of 100.
NATIONAL STRATEGIC PLAN (2017-2025)

Find all TB cases with an emphasis on reaching every TB patient in the private sector

Treat all TB cases with high quality anti TB drugs

Prevent the emergence of TB in susceptible populations and stop catastrophic expenditure due to TB by all

Build & strengthen supportive systems including enabling policies, empowered institutions & human resources
Decentralize TB screening to AB-HWC levels

Scale up Molecular Diagnostics to the Peripheral Levels

Early Detection of DRTB-Universal DST

Vulnerability Mapping & Active case finding

Private Sector Engagement

### Technology

<table>
<thead>
<tr>
<th>Technology</th>
<th>2014</th>
<th>2021</th>
</tr>
</thead>
<tbody>
<tr>
<td>Microscopy</td>
<td>13,657</td>
<td>21,717</td>
</tr>
<tr>
<td>Rapid Molecular Test</td>
<td>119</td>
<td>3164</td>
</tr>
<tr>
<td>Culture lab</td>
<td>50</td>
<td>87</td>
</tr>
</tbody>
</table>

Active case finding through mobile medical van

Patient Provider Support Agency

- **2018**: 48 large cities (JEET)
- **2019**: 156 (domestic) + 95 (JEET)
- **2020**: 266 (domestic) + 109 (JEET)
TREAT

Daily regimen – Fixed Dose Combination

Sustain Treatment Success Rate of > 90%

Injection free treatment regimens

Scale up of Newer drugs/regimens

>4 lakh ASHA & Community Volunteer as DOT provider

ICT based adherence

• 800 treatment centre for DR-TB
• Bedaquiline & Delamaind
PREVENT

Sustaining COVID appropriate behavior

Contact Tracing & TB Preventive Treatment

Airborne Infection Control in community & Health Facilities

Community Mobilization & People’s Movement

Contact tracing and screening of all household contact and TB Preventive Treatment

- 1.64 lakh • Child <5 years in contact of TB treated with TPT
- 11 lakh • People living with HIV/AIDS given TPT

Expansion of policy in household contacts for all age group
Impact of COVID-19 on TB notification & recovery status (2020)

4 High Burden Countries

TB Notification Progress

2021: Jan-Aug - Source: Nikshay
PROGRAMME PERFORMANCE-N TEP 2020

- HIV Status Known: 92%
- UDST: 67%
- MDR TB Treatment Initiation: 86%
- IPT among children: 34%
- TPT among PLHIV: 47%
NIKSHAY Poshan

• Rs. 500/- per month given to every TB patient through DBT for duration of treatment
• Scheme rolled out from April 2018
• Rs. 1204 Cr of amount disbursed to beneficiaries

NIKSHAY

PFM

Patients

Bank

Coverage

TB patients provided benefit

Public sector – 73%,
• Private – 39%

Period - April 2018 to June 2021
## NIKSHAY POSHAN YOJANA (NPY)

### Proportion of TB patients paid out of those eligible

<table>
<thead>
<tr>
<th>Year</th>
<th>Total (Pub + Pvt) (%)</th>
<th>Public (%)</th>
<th>Private (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018</td>
<td>61</td>
<td>70</td>
<td>22</td>
</tr>
<tr>
<td>2019</td>
<td>67</td>
<td>78</td>
<td>38</td>
</tr>
<tr>
<td>2020</td>
<td>73</td>
<td>80</td>
<td>55</td>
</tr>
<tr>
<td>2021 (Jan-Mar)</td>
<td>75</td>
<td>82</td>
<td>54</td>
</tr>
</tbody>
</table>

### Yearly Patients, Bank Details & Payments

<table>
<thead>
<tr>
<th>Year</th>
<th>Current Patients</th>
<th>Bank details available</th>
<th>Bank details validated</th>
<th>Paid at least once</th>
</tr>
</thead>
<tbody>
<tr>
<td>2020 (In lakhs)</td>
<td>18.13</td>
<td>14.60 (81%)</td>
<td>13.67 (75%)</td>
<td>13.22 (73%)</td>
</tr>
<tr>
<td>2019 (In lakhs)</td>
<td>24.00</td>
<td>22.95 (96%)</td>
<td>17.56 (73%)</td>
<td>16.08 (67%)</td>
</tr>
</tbody>
</table>
## Mechanisms for Monitoring and Evaluation

**Internal**
- Quarterly Review meeting at National, State and District levels
- Central & State Internal Evaluations
- External and Internal Quality assessment of labs by IRLs and NRLs
- Annual Common Review Mission as part of NHM
- Sub National TB free certification

**External**
- State Health Index report by NITI Aayog (Annual)
- World Bank review mission (6 monthly)
- Joint monitoring mission by WHO (once in 3 years)

### Proposed Activity

<table>
<thead>
<tr>
<th>Proposed Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Joint supportive supervision by deputing central teams</td>
</tr>
<tr>
<td>State wise review by HFM</td>
</tr>
</tbody>
</table>
TB Score dashboard – State level

<table>
<thead>
<tr>
<th>Sr no</th>
<th>State Name</th>
<th>Score</th>
<th>% Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Andaman &amp; Nicobar Islands</td>
<td>17</td>
<td>-15%</td>
</tr>
<tr>
<td>2</td>
<td>Andhra Pradesh</td>
<td>12</td>
<td>-31%</td>
</tr>
<tr>
<td>3</td>
<td>Arunachal Pradesh</td>
<td>16</td>
<td>+9%</td>
</tr>
<tr>
<td>4</td>
<td>Assam</td>
<td>13</td>
<td>-34%</td>
</tr>
<tr>
<td>5</td>
<td>Bihar</td>
<td>1</td>
<td>-17%</td>
</tr>
<tr>
<td>6</td>
<td>Chandigarh</td>
<td>13</td>
<td>-35%</td>
</tr>
<tr>
<td>7</td>
<td>Chhattisgarh</td>
<td>18</td>
<td>-36%</td>
</tr>
<tr>
<td>8</td>
<td>Delhi</td>
<td>18</td>
<td>-32%</td>
</tr>
<tr>
<td>9</td>
<td>Goa</td>
<td>17</td>
<td>-15%</td>
</tr>
<tr>
<td>10</td>
<td>Gujarat</td>
<td>10</td>
<td>-50%</td>
</tr>
<tr>
<td>11</td>
<td>Haryana</td>
<td>15</td>
<td>-20%</td>
</tr>
<tr>
<td>12</td>
<td>Himachal Pradesh</td>
<td>16</td>
<td>+9%</td>
</tr>
<tr>
<td>13</td>
<td>Jammu &amp; Kashmir</td>
<td>15</td>
<td>-30%</td>
</tr>
<tr>
<td>14</td>
<td>Jharkhand</td>
<td>17</td>
<td>-15%</td>
</tr>
<tr>
<td>15</td>
<td>Karnataka</td>
<td>10</td>
<td>-50%</td>
</tr>
<tr>
<td>16</td>
<td>Kerala</td>
<td>17</td>
<td>-15%</td>
</tr>
<tr>
<td>17</td>
<td>Madhya Pradesh</td>
<td>17</td>
<td>-15%</td>
</tr>
<tr>
<td>18</td>
<td>Maharastra</td>
<td>12</td>
<td>-31%</td>
</tr>
<tr>
<td>19</td>
<td>Manipur</td>
<td>11</td>
<td>-45%</td>
</tr>
<tr>
<td>20</td>
<td>Meghalaya</td>
<td>14</td>
<td>-35%</td>
</tr>
<tr>
<td>21</td>
<td>Mizoram</td>
<td>15</td>
<td>-20%</td>
</tr>
<tr>
<td>22</td>
<td>Nagaland</td>
<td>13</td>
<td>-34%</td>
</tr>
<tr>
<td>23</td>
<td>Orissa</td>
<td>10</td>
<td>-50%</td>
</tr>
<tr>
<td>24</td>
<td>Puducherry</td>
<td>17</td>
<td>-15%</td>
</tr>
<tr>
<td>25</td>
<td>Punjab</td>
<td>10</td>
<td>-50%</td>
</tr>
<tr>
<td>26</td>
<td>Rajasthan</td>
<td>17</td>
<td>-15%</td>
</tr>
<tr>
<td>27</td>
<td>Sikkim</td>
<td>15</td>
<td>-20%</td>
</tr>
<tr>
<td>28</td>
<td>Tamil Nadu</td>
<td>17</td>
<td>-15%</td>
</tr>
<tr>
<td>29</td>
<td>Telangana</td>
<td>12</td>
<td>-31%</td>
</tr>
<tr>
<td>30</td>
<td>Tripura</td>
<td>17</td>
<td>-15%</td>
</tr>
<tr>
<td>31</td>
<td>Uttar Pradesh</td>
<td>11</td>
<td>-45%</td>
</tr>
<tr>
<td>32</td>
<td>Uttarakhand</td>
<td>14</td>
<td>-35%</td>
</tr>
<tr>
<td>33</td>
<td>West Bengal</td>
<td>17</td>
<td>-15%</td>
</tr>
<tr>
<td>34</td>
<td>West Bengal (1)</td>
<td>17</td>
<td>-15%</td>
</tr>
<tr>
<td>35</td>
<td>Uttarakhand (1)</td>
<td>14</td>
<td>-35%</td>
</tr>
<tr>
<td>36</td>
<td>West Bengal (2)</td>
<td>17</td>
<td>-15%</td>
</tr>
<tr>
<td>37</td>
<td>Uttarakhand (2)</td>
<td>14</td>
<td>-35%</td>
</tr>
<tr>
<td>38</td>
<td>India (Total)</td>
<td>17</td>
<td>-15%</td>
</tr>
</tbody>
</table>
With 31 districts, Karnataka score for Q2-2020 is 11 lower than National Average 13.
TB Notification Dashboard – Option to view 3 views

- Summary View
- Geographic View
- Table View
• Trend in Notification
  • Public
  • Private
• Treatment care cascade
• Age Sex Pyramid
• Patient Type
• HIV status
• UDST status
• Treatment Outcome
MoHFW invites Claims

Districts submit claims to State

States submit claims to MoHFW

Independent Agency (ICMR) verifies claims

Successful claims awarded on World TB Day

**Verification**

- Community survey to find out incidence & under-reporting
- Interviews & FGDs with private doctors & chemists to verify drug sale
- Review of records & patient interviews to verify TB score

### Awards

<table>
<thead>
<tr>
<th>Criteria (Incidence decline)</th>
<th>Bronze</th>
<th>Silver</th>
<th>Gold</th>
<th>TB Free</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ 20%</td>
<td>☐ 40%</td>
<td>☐ 60%</td>
<td>☐ 80%</td>
<td></td>
</tr>
<tr>
<td>State Awards (Rs In lakhs)</td>
<td>25</td>
<td>50</td>
<td>75</td>
<td>100</td>
</tr>
<tr>
<td>District Awards (Rs In lakhs)</td>
<td>2</td>
<td>3</td>
<td>5</td>
<td>10</td>
</tr>
</tbody>
</table>
### SUB NATIONAL CERTIFICATION-2020 AWARDS

State of Kerala and UT of Puducherry and 29 Districts across 11 States.

- Lahul Spiti, Himachal Pradesh,
- Kolhapur District of Maharashtra
- Parel (ward) of Mumbai,
- West Tripura District of Tripura

- District Diu of DNH&DD

- UT of Lakshadweep,
- District Budgam of J&K
COMMUNITY LED RESPONSE

TB Forum – Composition

TB Forums

TB Forum – platform for community Institutional Structure

National TB Forum
State TB Forum
District TB Forum
Block TB Forum
TB Champion
Patient Support Group
TB CHAMPION INITIATIVE

Transformation of TB survivor to TB Champion

Activities

- National Conference of TB Champions
- Toolkit for involvement of PRIs in TB
- Compendium of SOPs for involvement of Community Volunteers, SHGs, TB Champions, TB Forum
- Guidance Document on Community Engagement
TB – A SOCIAL DISEASE

- Vulnerable
  - Elderly, children & women
  - Tribal Affairs, PRI, SHG, Rural Devp, WCD

- Poor housing
  - Rural & Urban Development

- Malnutrition
  - Nikshay Poshan Yojana, National Food Security Act, WCD, Tribal Affairs

- Overcrowding
  - Sustain COVID appropriate behaviour

- Rural & Urban Development

- Poor housing

- Malnutrition

- Overcrowding
## TB Regimens, Duration and Cost Per Course

<table>
<thead>
<tr>
<th>Type of TB</th>
<th>No. of patients</th>
<th>Duration of Treatment</th>
<th>Per patient cost (In Rs)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drug Sensitive TB</td>
<td>17,55,000</td>
<td>6 - 8 months</td>
<td>2,100</td>
</tr>
<tr>
<td>(97% of TB patients)</td>
<td>(3% of TB patients)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Drug Resistant TB</td>
<td>49,679</td>
<td>9-11 / 18-20 months</td>
<td>9,768 – 1,19,617</td>
</tr>
</tbody>
</table>

### Procurement:
- Drugs are procured from CMSS (Domestic) & GDF (Global Drug Facility) centrally
- Procurement of diagnostics are also now decentralised to State level
INTER-MINISTERIAL COLLABORATION

21 Ministries are prioritized for addressing non health determinants

Railways
- Diagnosis and treatment through Railway hospitals/ dispensaries
- Mapping of Railway Health Facilities in Nikshay
- Use of NTEP IEC Material in Railway premises

Tribal Affairs
- Support towards upgradation of health infrastructure using MoTA funds
- Involvement of NGOs under MoTA in TB
- Joint Tribal Action Plan for TB in notified Tribal districts

Ministry of Labour & Employment
- TB Free Workplace policy
- Diagnosis and treatment through ESIC hospitals/ dispensaries
- Network of Training Institutes under MoLE to reach out to work places

6 MoUs signed with Railways, Defence, AYUSH, Labour & Employment, CII and DONER
- Diagnosis and treatment through Railway hospitals/ dispensaries
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Proposed Committee under HFM with Ministers of Prioritized Ministries- Sep/Oct 2021

6 MoUs signed with Railways, Defence, AYUSH, Labour & Employment, CII and DONER
124 Corporates have taken TB Pledge to fight against Disease

Industries facilitated TB screening of more than 20 lakh people

3 Mobile X-ray Vans, 6 CBNAAT Machines and 15 Microscopy Centers for community screening contributed

6 Regional Roundtables conducted bringing together key policy makers and healthcare providers in 6 States

**Silver**
1. NALCO
2. Corning India
3. RITES Limited
4. Sandoz Private Limited
5. Sanofi India Limited

**Gold**
1. Adani Foundation
2. Ambuja Cement
3. Bata India Ltd., Patna
4. Panasonic Life Solutions
5. GMR Varalakshmi Foundation

**Platinum**
1. Gail India
2. Becton Dickinson India Private Limited
3. HCL Foundation
4. Johnson & Johnson Private Limited
5. Parry Agro Industries Ltd.

**Diamond**
1. BEST Mumbai
2. Apollo Tyres Foundation
3. Medanta
4. TCI
5. Goodricke Group
6. Fuji Films
TB Harega Desh Jeetega