



## TUBERCULOSIS PROFILE



Tuberculosis is a major public health problem in Senegal. According to the *WHO Global TB Report 2006*, Senegal had nearly 28,000 TB cases in 2004. Of these, 12,479 were pulmonary sputum smear-positive (SS+) cases, with an estimated incidence rate of 245 cases per 100,000 people.

There are limited data available on the prevalence of HIV among TB patients, although 2003 data from hospitalized TB patients in Dakar and Kaolack recorded HIV rates of 15 percent and 16 percent, respectively. The National Tuberculosis Program (NTP) estimates that multidrug resistance is as high as 2 percent among new cases.

Country population	11,385,913
Estimated number of new TB cases	27,917
Estimated TB incidence (all cases per 100,000 pop.)	245
DOTS population coverage (%)	100
Rate of new sputum smear-positive (SS+) cases (per 100,000 pop.)	57
DOTS case detection rate (new SS+) (%)	52
DOTS treatment success rate in 2003 (new SS+) (%)	70
Estimated adult TB cases HIV+ (%)	4.7
New multidrug-resistant TB cases (%)	1.9

Note: All data are for 2004 except where noted otherwise.  
Source: Global Tuberculosis Control: WHO Report 2006.

### USAID's Approach and Key Activities

USAID's approach in Senegal complements the priorities of the NTP. Senegal completed a five-year TB program plan for 2002–2006, which has been revised and is now operating for 2005–2009. The plan calls for decentralization of TB diagnostic and treatment services, with direct observation of treatment during the first two months of therapy (intensive phase) and a standard eight-month treatment regimen. USAID's approach is to improve TB treatment success by targeting health facilities as well as communities where community health workers will integrate community Directly Observed Therapy, Short-Course (DOTS). In particular, this effort will target Dakar, where 50 percent of Senegal's TB burden is found. Between 2001 and 2005, USAID funds for TB programming in Senegal averaged approximately \$800,000 per year.

USAID assistance targets the following activities and interventions:

- Strengthening program management for TB
- Strengthening capacity for communities to correctly diagnose and treat TB
- Improving TB diagnosis (increased SS+ notification rate) in USAID-supported health facilities
- Improving follow-up for clinic-based TB treatment adherence in USAID-supported health facilities
- Decreasing TB treatment defaulter rates

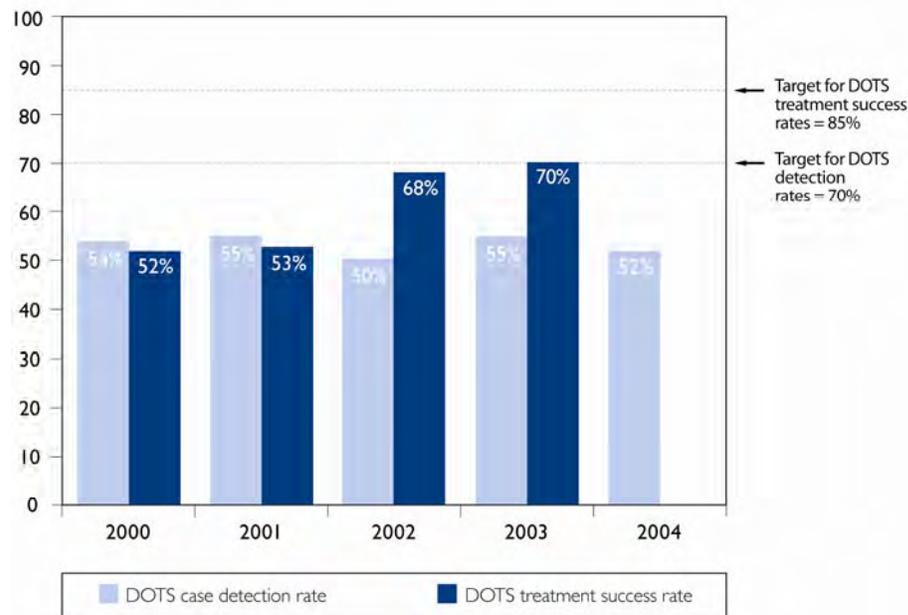
- Decentralizing TB drugs to the health post level at three selected health posts per district
- Institutionalizing HIV/AIDS and TB reciprocal testing (i.e., HIV-positive patients are systematically screened for TB, and TB-positive patients are systematically offered voluntary counseling and testing services for HIV/AIDS)

### USAID Program Achievements

USAID's support has reinforced NTP capacity to implement the DOTS strategy through the following achievements:

- Increased the treatment success rate for the first half of 2004 to 76 percent (NTP estimate) from 53 percent in 2001
- Decreased the treatment defaulter rate to 10 percent in 2004 from 25 percent in 2001
- Conducted more than 4,350 education sessions and 9,170 home visits to inform citizens about malaria and TB
- Trained 75 health care providers in 24 care units to implement the DOTS strategy
- Supervised health care units in 30 health districts in eight regions
- Provided basic TB information to 1,600 community leaders
- Created 94 support groups to reinforce the DOTS strategy at the community level
- Equipped nine laboratories with microscopes and three reference laboratories with electronic balances

### Case Detection and Treatment Success Rates Under DOTS



Note: DOTS treatment success rate for 2004 will be reported in the 2007 Global Report.  
Source: Global Tuberculosis Control: WHO Report 2006.

### Partnerships

USAID works closely with the NTP and other international organizations including Family Health International, the Christian Children's Fund, the International Union Against Tuberculosis and Lung Disease, and other U.S. private voluntary and nongovernmental organizations throughout the country.