

# HOPE worldwide

**PNG UPDATE MAY-JULY 2007**

## **DEFEATING TUBERCULOSIS IN PAPUA NEW GUINEA**

In January, we commenced coordinating tuberculosis treatment control for the capital - Port Moresby. This is one of the most important programs we have ever undertaken.

Around one third of Papua New Guineans are infected with tuberculosis (TB). Every year, this reactivates in some - infants, children, young adults and seniors become ill and without treatment usually die. Most commonly the lungs are affected. Symptoms include blood-stained coughing, weight loss, and breathing difficulties. Many notable historical figures died of TB, and you will often see descriptions in movies and books. In the developed world, the disease was virtually eradicated in the 1950s-1960s. But in PNG it still is a scourge - killing more adults each year than any other infectious disease. With the HIV/AIDS epidemic, TB cases are rising dramatically as the two infections often co-exist, and TB causes over half of the deaths in people living with AIDS.

**Lina Jossie** is an active 20 year old who became very sick in 2006. Doctors treated her for other diseases as her sputum sample tested negative for TB. Her persistent cough increased in severity and early this year another sputum sample tested positive. Lina is the first patient from the Taurama Barracks clinic to benefit from HOPE *worldwide's* TB control activities. Clinic nurses feared she might default due to difficulties swallowing the loose tablets she had been given to self administer at home. The HOPE *worldwide* team interviewed Lina and informed her about the fixed-dose combination drugs. The switch sees her pill-burden reduce from 12 tablets to 3.



***“I look in the mirror everyday and see the changes. I see myself gaining new life everyday”.***

“I really like the new drugs, the old ones are too many tablets” she enthused.

Because Lina lived within easy walking distance to Taurama clinic, we realised that the perfect volunteer to directly observe her treatment would be Tahuni Tom, a committed community-minded young woman who was volunteering at the clinic. Now Lina comes to the clinic each day. “Lina was really down on the first day.” Tahuni remembers. “After the changes in her after three days, it really encouraged me and made me see how important my work as a volunteer was. She is putting on weight and is bright and happy. We have become really close.”

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Treatment is available and free, and the disease is curable in nearly 100% of cases. However, many don't complete the 6-9 month treatment course of up to 14 capsules per day, and so remain uncured. Others die undiagnosed. The "DOTS" strategy developed by the World Health Organisation (WHO) has been shown to dramatically improve treatment outcomes. This involves direct supervision of medicine-taking by community volunteers or clinic workers. Extra attention is given to those patients who have the TB bacilli in their sputum (spit) as they can pass on the disease to 10-15 healthy people each year.

DOTS has been successfully implemented in Lae in Morobe Province, and by our Nine Mile Clinic in Port Moresby. However, in the remainder of the country, the disease is still rampant. Cure rates are 50-60% or less, compared to the internationally accepted target of 85%+. This level of success is needed not just to save lives, but to slow down the number of new infections.

The WHO asked us to coordinate a city-wide DOTS program, and we approached The Charitable Foundation – a private Australian philanthropic charity – for support. The Foundation generously agreed and we now have a three year program operating, run by Osana Meara and Jacinta Dagina, and an Australian Youth Ambassador for Development volunteer from Sydney – Tope Adepoiyibi. Each week, they visit all the clinics in Port Moresby that treat people with TB. Staff at the clinics are trained, monitored, and encouraged in all aspects of TB control. These include clinical and laboratory diagnosis, setting up of DOTS points in the communities, communications of results, record keeping, and tracing of people who default from their medicine.



So far, many problems and weaknesses in the clinic and laboratory systems have been identified and corrected. Many community DOTS points have been set up, and the WHO has introduced single-patient fixed-dose combination treatment packs, which has reduced the numbers of tablets people need to take. There is a new spirit in health professionals and volunteers across the city – an understanding and a hope that this terrible disease can be controlled.

To left: Tahuni watching Lina take her medicine  
Below: Jacinta (standing) with Port Moresby General Hospital TB clinic staff

Most recently, PNG has been awarded a large grant from the Global Fund to Fight AIDS, Tuberculosis and Malaria. This provides further funds and resources for the programs in the capital and in Morobe Province, and then replicate this model across Papua New Guinea. In 5-7 years, we hope to be able to state that TB is on the retreat all over the country, and hopefully in a couple of decades the problem will be a rarity, like it is in Australia. It is a long battle, but one that must be won.

*Thank you for your support!*  
Dr. Graham Ogle, Regional Director (South Pacific)

