

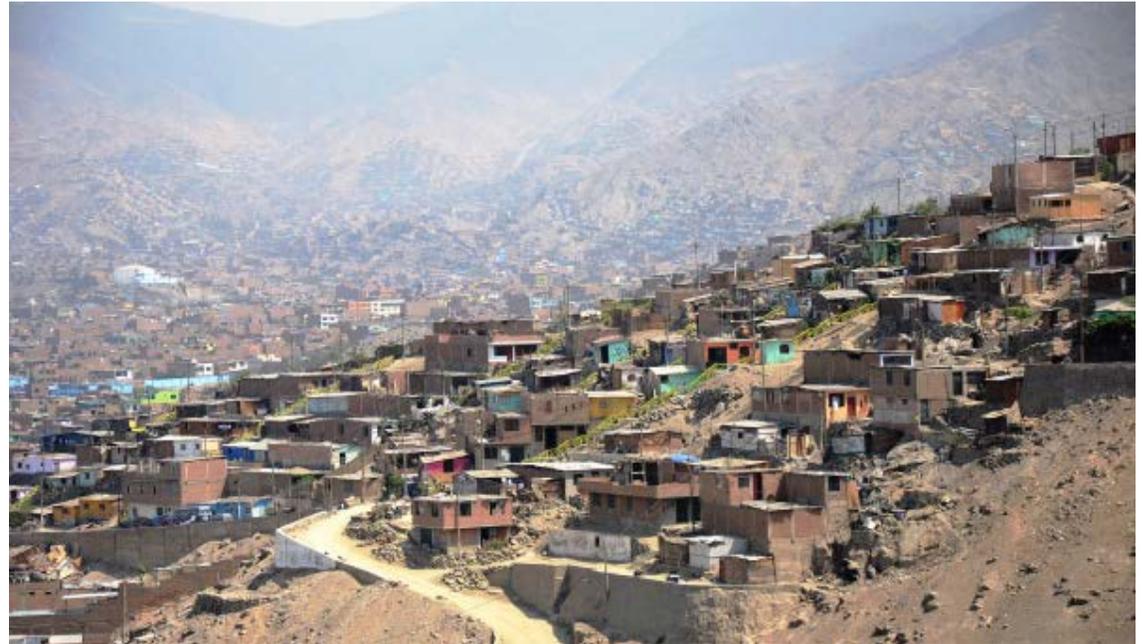


Saving Lives in Peru

TUBERCULOSIS

Socios En Salud (SES), established in Lima in 1996, is the Peruvian branch of the international non-profit organization Partners In Health (PIH). SES' mission is to provide a preferential option for the poor in healthcare, through the accompaniment of government institutions in order to enhance their capabilities and the quality of services offered.

Our efforts are focused on the provision of comprehensive, quality healthcare for communities in resource-poor settings. In coordination with public and private institutions, we work to bring together the benefits of modern science in the fight against disease, poverty and injustice.



En 1996 SES inició su misión en Carabayllo, distrito urbano marginal al norte de Lima.

TUBERCULOSIS: The power of the community-based model for treating and curing impoverished persons.

Today, TB should not be a fatal or even a complicated disease requiring extensive and painful treatment. Through a comprehensive and timely approach, we have shown that it is possible to stop the disease.

Two decades ago, the international community considered MDR-TB treatment non-viable in developing countries due to high medication costs, insufficient healthcare infrastructure and cases who often required complex management, conspiring to sentence these patients to death.

In 1996, SES began working on a pioneering model to treat persons affected with MDR-TB. A comprehensive ambulatory care approach proved highly effective for these patients, resulting in a strategy that was later adopted by the World Health Organization.

SES continues to work in coordination with the Ministry of Health to strengthen the prevention and control of TB nationally.

At present, we continue with our pioneering mission, focusing on the most marginalized and excluded groups, developing research projects and closing the gaps which limit access to health care.

2013 DATA

TB Incidence:
90.3 cases per 100,000 persons

TB cases:
31,052 (57% in Lima)

MDR TB cases:
1,281 (75% in Lima)

XDR TB cases:
77 (89% in Lima)

Fuente: ESNPCT / DGSP / MINSA / PERÚ-2014

País con mayor casos de TB MDR reportados en las Américas

Community-Based Treatment

Community-Based Attention Model

Less than half of the persons affected by MDR TB worldwide are cured. SES, in partnership with the Peruvian Ministry of Health, has managed to successfully treat hundreds of people using the community-based model. The SES intervention has achieved the highest cure rate in MDR-TB patients in the world (83%).

MDR-TB cure rates

2012		48% WHO
2012		75% Ministry of Health - Peru

*N Engl J Med 2003; 348:119-128

Priority Programs

EXTREMELY RESISTANT TUBERCULOSIS



XDR-TB is the most complex of TB infections due to the resistance to nearly all of the powerful medications available. With over 500 registered cases, Peru has the highest percentage of XDR cases in the Americas. In coordination with the Ministry of Health, SES supports a community-based model for the home treatment of persons affected with XDR-TB through an integrated clinical approach.

MENTAL HEALTH



Due to the stigma and discrimination associated with TB and its long and difficult treatment, SES offers psycho-emotional support to affected persons through counseling, group therapy and recreational activities. These supportive activities aim to provide patients with the tools necessary to better manage their illness and adherence to long-term treatment.

SOCIAL PROTECTION



SES addresses the social factors that hinder access to integrated health services and treatment adherence which can lead to new TB cases or disease relapse or reinfection. Examples of direct, urgent care that SES provides includes socio-economic support to cover essential basic expenses such as medical supplies, food, better housing to support care and infection control, and transport to health facilities.

INCOME GENERATION



Illnesses can critically impact the poorest and most vulnerable populations well beyond the disease itself, when the ability to work is reduced or eliminated. To address this issue, SES works with families affected by TB to create sustainable, income-generating opportunities with the goal to eventually break the poverty-disease cycle. The Income Generation program provides small loans (microcredit) and job skills strengthening workshops so that individuals and families can improve their long-term income and livelihoods.



Acompañamiento a afectado de TB MDR en la implementación de módulo de vivienda .



PATIENT TESTIMONY: A teenage girl recovering from TB



In May 2013, Melissa was diagnosed with Extremely Resistant Tuberculosis (XDR-TB). She was hospitalized and is now undergoing an extensive and complex treatment.

Despite facing a difficult situation, Melissa is optimistic and she is expected to finish high school along with her treatment.

"This is my battle, and it drains my energy. I am very positive. Instead of sinking I have become stronger and I will keep fighting and facing this disease for as long as it takes. I am very hopeful. I know that sooner or later there will be a cure for all of us."

The picture shows a home visit from a nurse who will provide intravenous treatment through a Port catheter. This treatment is provided during a 12-month period, continuing with oral treatment for another 12 months.

Gaps to address to improve TB health care What do we need?

It is still necessary to strengthen State clinical activities, as well as the community-based approach, mental health and social protection of TB, MDR-TB and XDR-TB patients. Moreover, special attention must be offered to vulnerable groups (children, indigenous populations, incarcerated persons, among others), and those living with TB-HIV co-infection and other diseases that can increase the risk or severity of TB such as diabetes and cancer.

SES seeks to expand the community health care model to address existing gaps in different regions of Peru.

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