

**Title: Monitoring and Evaluation of the Pilot Implementation of 3HP as Tuberculosis Preventive Therapy (TPT) for People Living with HIV (PLHIV) at high-volume facilities in Ehlanzeni District, Mpumalanga: Lessons Learnt**

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## **Background**

The WHO recommends shorter regimens like 3HP, as TB Preventive Therapy (TPT) for PLHIV. 3HP consists of three months of weekly high-dose isoniazid and rifapentine, is reportedly non-inferior, less toxic, with higher completion rates than Isoniazid Preventive Therapy (IPT). Upcoming South African TPT guidelines advocate for national implementation of shorter regimens, yet Tier.net only reports on IPT. We report on lessons learnt on the Monitoring and Evaluation (M&E) of the 3HP pilot implementation in high-volume facilities of Ehlanzeni, Mpumalanga.

## **Methods**

Ehlanzeni adopted a phased implementation approach, with 30 high-volume clinics included in Phase 1. We provided technical assistance, including facility staff induction and mentorship, project data management support and 3HP stock management. The National TB Programme (NTP) approved a hybrid 'Recording and Reporting (R&R)' system, parallel to Tier.net, for paper-based recording, and electronic tool for monthly reporting of initiations. The latter was subsequently changed to an online tool to facilitate cohort outcome reporting to NTP and PEPFAR. Elements included demographic, ART & 3HP start dates, outcome, and outcome-date. Descriptive statistics are presented using frequencies and proportions.

## **Results**

Between July 2021 and June 2022, 1569 PLHIV were captured as 3HP-initiated, median 49 initiations/ facility; 1126 (72%) were captured on the online-tool for outcome-reporting. Reasons include loss of paper tools, and inability to delete 'false' initiations already reported. Of online-captured initiations, 78%, 92%, 89% had all fields completed, an outcome, and completed 3HP respectively. Without the ability to update the final number of initiations for the 'denominator', and loss of paper-sources, the completion rate reflects as 1006/1569 (64%).

## **Conclusions**

The use of a parallel R&R system led to data quality problems, reporting delays, and under-reporting of the 3HP completion rate. The revision of the National Indicator Data Set (NIDS) and Tier.net reports, should enable use of Tier.net for capturing and reporting of all TPT regimens.