Despite World Health Organization’s recommendation about the use of Xpert MTB/RIF as the initial diagnostic test among people living with HIV/AIDS, many national programmes continue to include sputum smear microscopy in the TB diagnostic algorithm for PLHIV. Despite the limited protective effect against development of TB, WHO recommends 6 months of IPT among PLHIV with no clear recommendation about repeat course of IPT. WHO provisionally recommends longer duration of IPT among PLHIV. These two issues remain outstanding at the programme level and will be discussed extensively at this symposium.

People affected by HIV, activists, National TB and HIV programme managers, TB and HIV clinicians, epidemiologists, international tuberculosis consultants, laboratory scientists, microbiologists

1. To raise two outstanding issues in HIV and TB to prompt discussion of key issues among experts
2. Topic 1: Is there a role for sputum smear microscopy for TB diagnosis among PLHIV?
3. Topic 2: Does 6 months of IPT among PLHIV have an impact at the programme level?

PLHIV; Xpert MTB/RIF; IPT, Diagnosis; TB

Anand Date (USA) - adate@cdc.gov
Anthony David Harries (UK), Anand Date (USA)

14:30 - 14:45 Performance and cost effectiveness of Xpert MTB/RIF in TB diagnosis among PLHIV.

14:50 - 15:05 Sputum smear microscopy should not be used prior to or in parallel to Xpert MTB/RIF among PLHIV. Chris Gilpin (Switzerland)

15:10 - 15:25 Xpert MTB/RIF should be performed among PLHIV with presumptive TB with negative sputum smear. Basra Doulla (Tanzania, United Rep.)

15:30 - 15:45 Benefit of isoniazid preventive therapy among PLHIV. Stephen Lawn (UK)

15:50 - 16:05 HIV programmes should scale up 6 months of IPT among PLHIV, despite its limited protective effect.

16:10 - 16:25 PLHIV should be given longer duration of IPT to achieve an impact at the programmatic level. Taraz Samandhari (USA)