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Kenya's First Ever TB Prevalence Survey since Independence

The last Kenya Tuberculosis (TB) Prevalence Survey was carried out in 1958 - 1959 when over 80% of the current population of Kenya were not born. The Ministry of Health has relied on existing TB surveillance data to estimate the burden of TB.

Tuberculosis (TB) is an infectious airborne disease spread when people cough, sneeze or sing. Although TB is preventable, treatable and curable, it remains Kenya's 4th largest cause of death. It affects all age groups, with its greatest toll among the most economically productive age group of 15 to 44 years.

Kenya was the first African country in 2008 to attain the WHO targets of detecting 70% of TB cases and treating 85% of these cases successfully. In 2014, 90,000 TB cases were reported, however it is estimated that there are about 20,000 'missing' TB cases that go undetected and untreated. These missing cases likely contribute to the ongoing transmission of TB in communities and thus hinder the nations' efforts to attain zero TB infections and zero death.

With the launch of the Prevalence Survey, for the first time since independence, the Ministry of Health and key stakeholders will embark on a momentous nation-wide survey that will take approximately 8 -10 months. This is a massive undertaking that will entail both financial and human resources.

The TB survey will provide an accurate estimate of Kenya's TB burden, determine the existing challenges in accessing TB testing and treatment, and characterize persons identified with TB that were not yet detected by the National TB control program.

The process of the survey will involve a visit to individual households and invite those over 15 years of age to a nearby mobile field site located at a school or community hall. At the field site, participants will be interviewed on features of TB, requested for a chest x-ray and asked to provide a sputum sample. The survey findings will inform strategic TB interventions that address challenges faced in controlling TB and will go a long way in helping the country achieve globally recommended TB control targets by 2050.

Dr Joseph Sitienei, Survey Principal Investigator and Head of the Division of National Strategic Public Health Programs says, *"The importance of this TB survey for Kenya cannot be over emphasized. Its success is hinged on the participation of all Kenyans and involvement of all stakeholders. The government of Kenya will use the data collected from the field to inform policy and planning and move Kenya towards eliminating TB by 2030. I cannot be more proud to be involved in the process. It has been 55 plus years since this was done. For Kenyans and Kenya this is a big achievement."*

The Director for Medical Services, Dr. Nicholas Muraguri says, *"Public and Private Partnership is one of the many pillars that support the work the Ministry of Health does. This partnership approach guarantees that this survey is informed by the combined best thinking of a broad range of stakeholders to ensure its success."*



KENYA TUBERCULOSIS PREVALENCE SURVEY 2015 – 2016

Assessing Kenya's TB Burden
REACH, TREAT, CURE EVERYONE





NOTES TO THE EDITORS

Ministry of Health, Kenya

The Kenyan Ministry of Health's vision is for a healthy, productive and globally competitive nation. The Ministry's goal is to attain equitable, affordable, accessible and quality health care for all. The mandate of the Ministry is in health policy, regulation, national referral health facilities, and capacity building and technical assistance to Counties.

National Tuberculosis Leprosy and Lung Disease Program (NTLD-Program)

The NTLD-Program sits under the Division of National Strategic Health Programs in the Department of Preventive and Promotive Health at the Ministry of Health. The program aims to reduce the burden of lung disease in Kenya and render Kenya free of Tuberculosis and Leprosy. The program plans to do this by sustaining and improving Tuberculosis, Leprosy and Lung disease control gains in order to accelerate the reduction of Tuberculosis incidence, intensify post-elimination Leprosy activities and control lung disease.

CONTACTS

Dr Nicholas Muraguri

Director Medical Services,
Ministry of Health,
Afya House, Cathedral Road
P.O BOX 30016-00202, Nairobi, Kenya
dmskenya@gmail.com

Samuel Misoi, MPH

Head: Prevention & Health Promotion Section,
National Tuberculosis, Leprosy and Lung Disease Program
Ministry of Health,
Afya House Annex | Kenyatta National Hospital Grounds
P.O BOX 20781-00202, Nairobi, Kenya, Tel-0770458624
smisoi@ntlp.co.ke OR smisoi2002@gmail.com

Juliette J Mutheu-Asego

Communication, Media & Advocacy
USAID-Tuberculosis Accelerated Response and Care (USAID-TB ARC) Activity
PATH & National Tuberculosis, Leprosy and Lung Disease Program (NTLD-Program)
ACS Plaza, 4th Floor | Lenana Road
PO Box 76634 | 00508, Nairobi
Tel: 254.20.3877177 / 80 / 89
jasego@path.org

