

# Centre for the diagnosis and management of Tuberculosis and HIV/AIDS







MESSAGE FROM THE

## **Executive Director**



The HIV virus continues to be marked by discrimination against population groups: those who live on the fringes of society or who are assumed to be at risk of infection because of behaviours, ethnicity, sexual orientation, gender, or social characteristics that are stigmatised in a particular society.

In Ananthapuram, as with most of the world, discrimination also jeopardises equitable distribution of access to disease prevention and healthcare, including drugs necessary for HIV/AIDS care to respond to the specific needs of all populations.

RDT's Infectious Diseases Centre has now become a renowned referral centre for HIV-positive patients. HIV testing of married males can be an effective HIV prevention strategy for general population, as women generally acquire the infection from their husbands and subsequently pass it on to their children. A large number of pregnant women still in India do not get themselves diagnosed for HIV infection due to shame factor or fear of coming out for getting tested and mistreated by family members and rejection by society as a stigma. RDT provides prenatal care to HIV-positive women, which includes HIV counselling, testing and treatment through specific medications during pregnancy and labour.

Our aim is to help HIV/AIDS/TB patients live healthier, longer lives with new medication and more effective combinations of drugs. In addition to providing the best possible care and support, we aim to address issues such as HIV and aging, as well negate the disparities in the care they receive.

**Anne Ferrer** 

**Tuberculosis** 

Around

2,500



cases of Tuberculosis being treated per year



**Impact** 

Nearly 95%
patients
are able to have a
normal life after
starting the treatment

**HIV-AIDS** 



73,843

OPD Visits of HIV patients in 2015

**HIV-AIDS** 

37,390

HIV admissions done so far

More than 50% of admitted patients

come from other districts

Infectious Diseases Hospital Timeline:

2006

Inauguration

April **2011** 

Recognised by NACO as ART centre to provide first line anti-retroviral treatment

# **About the Hospital**

RDT's Hospital of Infectious Diseases has become a renowned

referral centre offering a range of high-quality services in a

single location to people living with HIV/AIDS and TB.

Every year, India witnesses a large number of young deaths due to HIV/AIDS and TB. The situation is worse in rural areas, as awareness about these diseases is low and, therefore, susceptibility is high. To help people suffering from HIV/AIDS, RDT started a weekly clinic in Bathalapalli and Kuderu in 2002 where patients were treated on outpatient basis. As the number of HIV/AIDS patients gradually but steadily continued to increase in Ananthapuram, the organisation felt the need to start a dedicated hospital for the management of infectious diseases.

The Hospital of Infectious Diseases (HID) was opened in May 2006 in Bathalapalli with the aim of providing out-patient and in-patient care and supporting AIDS patients psychologically, nutritionally, physically, emotionally and financially. This was the first hospital in Ananthapuram to perform Caesarean sections on HIV-positive mothers and the first to conduct surgeries on HIV-positive patients to reduce the morbidity and mortality rates and help them lead a normal life.

The other objectives behind opening this hospital were to prevent the disease from spreading through awareness building, reduce the stigma and fear associated with the disease and stop discrimination against HIV/AIDS patients. In 2011, a new Clinical Microbiology Laboratory was created, especially to improve the diagnosis of Tuberculosis in the region.

Today, the HID treats over 2,500 cases of TB per year, many of them being cases of Multi-Drug Resistant Tuberculosis (MDR-TB). This is the first government-approved private hospital in India that can give second-line treatment to HIV/AIDS patients. Along with routine treatment and follow-up, the hospital also provides pre-test and post-test counselling, nutrition counselling, condom demonstrations, education about Prevention of Parent to Child Transmission (PPTCT), ART and TB treatment adherence and home-based care. Selected vulnerable patients such as widows, HIV infected children, patients with tuberculosis and those with very low income get food items rich in nutrition.

"My job is to make impossible dreams come true."

Vicente Ferrer, Founder - RDT

November 2011

Inauguration of new Microbiology laboratory and ward for TB August 2013

Recognised by RNTCP as MDR DOTS PLUS centre for treatment of MDR and XDR TB October **2015** 

Recognised by NACO as ART PLUS centre to provide second line ART MESSAGE FROM THE

# **Hospital Director**



A big concern nowadays is the rise in the number of cases of TB associated with HIV infection. Several studies have indicated that HIV increases the risk of TB disease and death, particularly in persons with untreated HIV disease.

Hospital of Infectious Diseases (HID) provides both health and preventive care such as the Prevention of Parent to Child Transmission of HIV (PPTCT) in Ananthapuram and surrounding areas, and provides nutritional support to the patients along with treatment. The success rate of handling PPTCT cases is visible in the form of disease-free children being born to HIV infected mothers. Patient referral rate to other hospitals and infection rate during surgeries are very low.

Our team focuses in increasing the quality and span of life of HIV/AIDS patients by providing them with ART (Anti-Retroviral Treatment). Multiple awareness programmes are conducted to give people knowledge about how it is transmitted, symptoms and prevention techniques so as to reduce the spread of the disease.

Simultaneously, with up-to-date medical protocols and regular trainings for doctors, rural people receive high quality care.

It will take long for people to shake off the stigma associated with HIV/AIDS disease – both in patients and in non-infected individuals, but RDT will continue to make high quality care accessible for HIV and TB patients without discrimination. At RDT's HID, all stakeholders work closely together to provide a holistic approach to infectious disease management by incorporating clinical, psychological, social, and preventive care services.

Dr. Gerardo Uria

Rural Development Trust



HIV/AIDS is considered a pandemic, a global epidemic which is present throughout India and is actively spreading. It has had a great impact on society, both as an illness and as a source of discrimination. In South India, the HIV epidemic is largely driven by heterosexual transmission and characterized by low CD4 cell count, poor socioeconomic status and high levels of illiteracy. The vast majority of children acquire HIV peri-natally, but 8% of female children acquire it through sexual contact. Sadly, 90% of those who acquire HIV peri-natally are diagnosed after they are 18 months old. RDT follows a multi-dimensional approach to treat HIV/AIDS which combines medical help with social integration and livelihood.

With the initiation of HID in May 2006, RDT aims to reduce the morbidity and mortality rates among HIV/AIDS patients, prevent the spread of the disease through counseling and awareness, reduce the stigma and discrimination prevalent towards HIV patients and treating TB patients. The organisation's value addition besides treatment is helping patients recover their self-esteem through combined economic and psychological support. In 2009, the organisation initiated a collaboration with the government to treat HIV/AIDS on a large scale.

CHWs and HOs play a significant role in community-level preventive care by spreading awareness about the disease and the importance of early testing. Outreach workers ensure that pregnant women are tested for HIV at Integrated Counseling and Testing Centres which helps diagnose and curb vertical transmission. Counselors, peer groups and outreach workers extend psychological support to patients and their families.

The disease also has had a large economic impact, especially for rural poor people. RDT provides free of cost treatment to all the HIV-infected patients without subjecting them to any discrimination. Nutritional support is provided to very poor and underprivileged people through bi-monthly packs. For HIV-positive orphans, educational support is extended. This approach has helped people living with HIV/AIDS better deal with the isolation the illness entails.

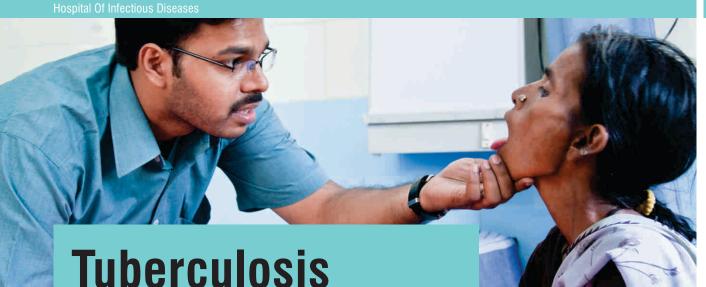
RDT has been testing and adapting to international protocols for tackling HIV/AIDS. For instance, the World Health Organisation's (WHO) protocols on HIV transmission have been applied to the Indian rural context as there is compelling evidence for their adoption.

RDT also has targeted programmes for particularly excluded and vulnerable groups, such as HIV widows. Their situation is particularly distressful, since the rejection and taboos associated with AIDS add to the already frail social position widows occupy. Over the past few years, the level of HIV prevalence in Ananthapuram district has shown a declining trend, and since 2009, the parent to child transmission rate has also come down.

## Highlights

- Since 2006, nearly 28,000
  HIV-infected people have been assisted
- Hospital of Infectious Diseases (HID) has become a referral centre in South India
- Nearly 50% of patients are from other districts

RDT aims to reduce the morbidity and mortality rates among HIV/AIDS patients, prevent the spread of the disease through counseling and awareness



India accounts for a quarter of the world's annual incidence of TB. Every year around 2 million people develop TB in India and 300,000 die. The World Health Organisation has shown concern for the alarming rise in rates of Multi-Drug Resistant (MDR) TB cases in India. Most of the rural people in Ananthapuram and nearby areas are chain smokers, and hence are at high risk of developing TB. As there was no TB treatment centre available in and around the area, RDT took the initiative to decrease the burden of TB in Ananthapuram free of cost along with nutritional support for patients.

Prevention of TB involves early screening of those at high risk and treatment. The RNTCP centre in RDT works along government guidelines for managing MDR TB. All suspected TB patients are admitted for checking sputum Acid-Fast Bacilli (AFB), chest X-rays, diagnosis and counselling. All TB cases are also screened for HIV and diabetes and referred to local PHCs for DOTS RNTCP Cat-I or Cat-II.

After registration, the patients undergo counselling for life style changes and are motivated to visit the hospital on a regular basis. Counsellors collect the data related to patients, identify their problems and give psychological support and guide the patients as per their need. MDR TB treatment is given to patients through DOTS Plus centres following RNTCP guidelines. All MDR TB and XDR TB cases are admitted in the hospital for treatment.

RDT outreach workers follow up with TB patients to check their adherence to medication. This has proven to have very positive effects, helping reduce abandonment of treatment and therefore combatting resistance of the infection.



# Highlights

 1,137 TB samples of suspected MDR TB tested in the past 1 year and 177 cases of MDR TB identified in HID

RDT outreach workers follow up with TB patients to check their adherence to medication. This has proven to have very positive effects, helping reduce abandonment of treatment and therefore combatting resistance of the infection.





In order to spread awareness about HIV testing among all pregnant women in the district, RDT has launched the Outreach programme.

Under this program, 31 Outreach Workers (ORWs) are rendering their services, and their work is monitored by 2 supervisors. The ORWs monitor the health status of HIV/AIDS patients and register and follow up infected pregnant women after mobilising them for HIV testing. The information and details provided by the ORWs help the HIV/AIDS Care and Support Centres to extend support to HIV-infected pregnant mothers for preventing transmission of the virus to the child. This is done by medications and check-ups at appropriate time intervals. ORWs also spread awareness about the disease and its life implications to halt TB incidence.



We are looking for...

An MBBS doctor willing to learn about Internal Medicine

#### Infrastructure

- Consultancy rooms 7
- . Counselling rooms 4
- . X-Ray room & dark room 1
- . Well-equipped laboratory 1
- Deep freezer for sample storage - 1
- Free-of-cost pharmacy 1

#### Staff

- . Medical officers 7
- . Head nurse 1
- . Nurses in-charge 2
- . Staff nurses 33
- Counsellors 16
- Pharmacists 2

Lab technicians - 10

. X-Ray technician - 1 . Microbiologist - 1

■ Support staff - 28



# **Support Services**



#### Microbiology

As there was no TB culture testing centre in Ananthapuram district, and the nearest government facility is available only in Vizag in coastal Andhra Pradesh which is more than 800 km from this place, RDT decided to open its own Clinical Microbiology Department in 2011 as the incidence of Multi-Drug-Resistant TB was increasing. The objective of this laboratory was to screen people for TB at an early stage and bring down the mortality rate. The initial diagnosis started with microscopy. By 2010, the department started using Auramine Rhodamine stain technique as a screening tool for TB.

Microbiological investigations like CD4 count determination and HIV viral load are done in the department for diagnosing and treating HIV. First line and second line Antiretroviral Therapy (ART) is given to patients confirmed with HIV infection.

For TB testing, investigations like fluoresceindiacetate sputum staining with LED fluorescent microscope, GeneXpert Polymerase Chain Reaction, Line probe assay for first and second line drug resistance mutations, Liquid culture for tuberculosis and phenotype resistance study are done in the laboratory.



#### **Nutrition & Dietetics**

To ensure HIV/AIDS patients receive the nutrition they need, RDT provides them with food rations free of cost. Under this programme, patients get 6 kg rice, 2 kg ragi, 2 kg daal, 2 kg wheat and 1 litre oil every month. This helps patients meet their daily dietary requirements and combat their infection as best they can with good nutrition.



#### **Hospital Information System (HIS)**

In 2009, RDT brought into use in-house software; Hospital Information Systems. Since then, maintaining patient data has become very convenient. The organized formats also help in fast retrieval of patients' medical history for better treatment. The software is continually upgraded for feature enhancements and better performance.



#### **Biomedical Waste Management**

It is indispensable to dispose of biomedical waste from hospital properly as it can be extremely dangerous for the health of people. The waste is collected thrice a day from the in collection bins that are colour-coded in accordance with the WHO guidelines. To cause minimum environmental pollution, bio-waste is disposed of by inhouse incineration. Kitchen waste and glasses are buried deep in the ground and plastics are shuddered.



#### Pharmacy

A 24-hour pharmacy is available for the convenience of patients and their families. All the common and useful medicines and drugs, syringes, first-aid, etc. are available at the store.

# Microbiology Infrastructure

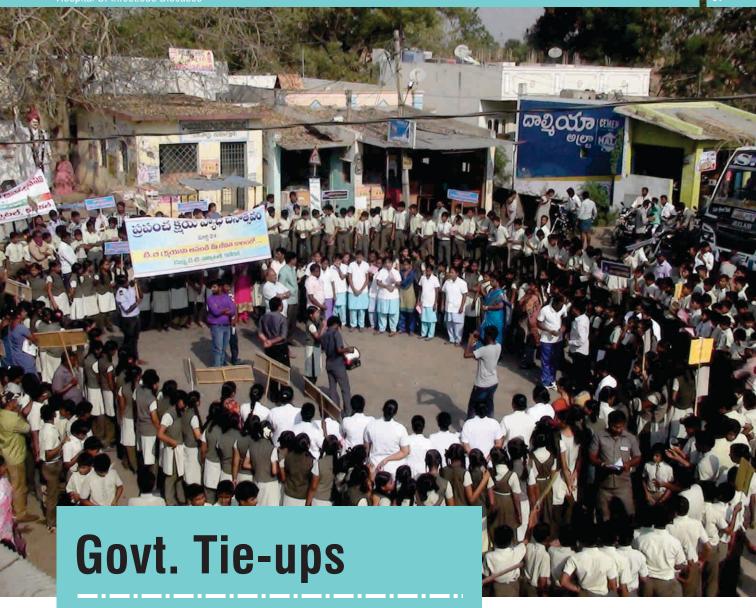
- BACTEC blood automated system
- . BD MGIT liquid culture system
- . GT-Blot 48
- GeneXpert PCR
- . BD CD4 FACS Calibur
- Antibiotic sensitivity

#### Staff

- Clinical microbiologist 1
- Microbiologists 3







#### HIV/AIDS

Recognised by NACO and APSACS, RDT's ART plus centre is an accredited Integrated Counselling and Testing Centre (ICTC), ART provider, and has a robust Prevention of Mother to Child transmission (PMTCT) programme.

#### **Tuberculosis**

Approval of DMC Centre (Designated Microscopic Centre for Diagnosis of TB) and treatment adherence centre by District Collector and Chairman, District TB Control society, Ananthapuram

Approved for DOTS plus Centre (Drug-Resistant Tuberculosis treatment and supervision centre) by District Collector and Chairman, District TB Control society, Ananthapuram

#### **Medical Education**

Continuing medical education consists of activities which serve to maintain, develop, or increase the knowledge, skills, and professional performance and relationships that a physician uses to provide services for patients, the public, or the profession. Doctors and medical staff are motivated to attend internal and external training programs in well-recognised educational institutions and international and national conferences.

Regular Continuing Medical Education (CME) workshops are conducted with the help of eminent speakers from various hospitals in South India to deliver lectures to Doctors, Nurses, and Technicians. The Medical Superintendent is responsible for organising at least one interdepartmental CME every month in the hospitals.

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8 Rural Development Trusi



- The exposure to a mix of high-risk patients under different categories adds to their professional knowledge.
- Doctors who associate with RDT get an exposure to international medical practices, as RDT attracts a host of high-calibre Spanish medical professionals and paramedical staff and other specialist faculty who visit the hospitals regularly.
- Selected medical and paramedical staff who are committed and want to study further are sponsored by RDT for their higher education. After completion of their studies, they should join the organisation for long term, under a mutually beneficial programme.
- The doctors and their families are provided residential quarters in eco-friendly campus along with free water and electricity.
- . They get an employee-friendly work atmosphere with flexibility.
- They have access to sports facilities to help maintain a healthy worklife balance.

A chance to serve people in the rural areas with a wellequipped hospital and experienced staff.

**Building your career with RDT Hospitals** 

We are always keen to partner with talented and impassioned healthcare professionals across a range of functions. We are as committed to our employees as they are to our patients and their families – you can be assured of competitive compensation and benefits to help you secure your future, and safeguard you and your family's healthcare needs.

The eligible candidates can send in their application, duly-filled in the prescribed format along with the essential documents, i.e. Mark Sheets, Education Certificates, Experience Certificate, Date of Birth Certificate, etc. to didbathalapalli@rdt.co.in

You can also apply through our website www.rdtfvf.org



# **Way Forward**

#### **Making India TB-Free**

RDT has been able to provide good quality of life to people living with HIV/AIDS through ART (Anti-Retroviral Treatment), constant follow-up and psychological support. There has been an increase in the number of patient visits to clinics for initial screening and treatment. This was possible through awareness building among rural people. But these results need to be consolidated, and retention of patients is required to curb this disease.

Currently, a growing number MDR TB cases are being registered in hospitals. Due to the stigma associated with these diseases and discrimination that TB and HIV patients face for getting treatment, adopting a human rights approach to these diseases is in the public interest.

RDT aims to improve the laboratory capacity and to get accreditation from RNCTP to perform liquid TB culture and drug susceptibly test. Approval for Negative Pressure Laboratory has been taken and the proposal

is in progress now. All the TB culture and sensitivity work will be manipulated in this negative pressure room, which gives the lab technician a safe work environment. It will be equipped with biosafety cabins, centrifuge and Mycobacteria liquid culture.

With medical advancements, staff support, and non-discrimination in administering treatment, RDT is confident that TB and HIV patients can lead a normal and productive life.





## **Rural Development Trust**

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