

# SIERRA LEONE

## 88% Policy Alignment

• **2,400** children estimated to have fallen ill with TB in 2022<sup>i</sup>

• **39%** of children with TB estimated to have missed out on diagnosis and treatment<sup>ii</sup>

## INTRODUCTION

As part of the Test, Avoid, Cure TB in Children (TACTiC) project, Médecins Sans Frontières (MSF) has conducted a survey of paediatric TB policies across 14 countries.

Sierra Leone has a high burden of TB. MSF has been working in Sierra Leone since 1986, and now works to support the Ministry of Health in providing care to children under the age of 5, pregnant women and people affected by TB; as well as strengthening the skills of medical professionals. MSF currently runs medical projects in three districts, Kenema, Tonkolili and Bombali, including

a project to improve the diagnosis, prevention and treatment of TB in children.

This factsheet compares current paediatric TB policy and implementation in Sierra Leone with the most recent World Health Organization (WHO) guidelines, celebrating progress and highlighting areas for improvement. The National Leprosy and Tuberculosis Control Programme (NLTCP), ministries and partners should use these findings to develop and implement national paediatric TB roadmaps that set out a clear strategy for ending TB in children.

## DIAGNOSIS



National guidelines on the diagnosis of TB in children in Sierra Leone are currently in line with WHO recommendations. This includes recommending healthcare workers enrol children who are very likely to have TB on treatment, as well as enabling the testing of stool samples. While the guidelines also include the treatment decision algorithms recommended by WHO, no supporting materials or training have been made available yet, underlining ongoing challenges with implementation.

## PREVENTION



National guidelines on TB prevention in children are also in line with WHO recommendations. This includes offering shorter TB preventive treatment (TPT) regimens for children under the age of 5 who are close contacts of someone with TB, and for children living with HIV. The guidelines also allow these children to be offered TPT without a positive tuberculin skin test or interferon-gamma release assay. The survey did not measure the level of implementation, however, and further work is needed to ensure all eligible children can benefit from TPT.

## TREATMENT OF DS-TB



Sierra Leone's national guidelines on the treatment of drug-susceptible TB (DS-TB) in children are in line with WHO's most recent WHO guidelines by recommending a shorter, 4-month regimen for children with non-severe forms of TB. Unfortunately, the NLTCP is not procuring the paediatric formulation of ethambutol, which is required for DS-TB treatment. This puts children in Sierra Leone at risk of being treated with adult drugs that can be less effective and even harmful.

## TREATMENT OF DR-TB



National guidelines on the treatment of children with drug-resistant TB (DR-TB) are in line with WHO's most recent recommendations. This includes recommending all-oral treatment regimens using bedaquiline and delamanid for children of all ages and procuring all the drugs required for this treatment in paediatric formulations. However, this survey did not measure how many children benefit from this standard of care.

## GLOBAL CALL TO ACTION: TEST, AVOID, CURE TB IN CHILDREN

WHO estimates that 1.25 million children under the age of 14 fall ill with TB each year around the world. Only 51% of these children are diagnosed and reported to NTPs, including just 40% of children under the age of 5 and 20% of children with drug-resistant TB. As a result, a child dies from TB every 3 minutes despite the disease being curable.

While there is an urgent need for better diagnostic tests and treatments for TB in children, these findings demonstrate that Sierra Leone and other countries are not yet making the most of the tools already at

our disposal. Last year, world leaders pledged to accelerate the global fight against TB. Governments, with support from national and international partners, must act now to ensure they don't leave children with TB behind.

To find out more about the policy survey and what steps governments, as well as funders and global health actors, can take to test, avoid and cure TB in all children, visit <https://msfaccess.org/tactic-test-avoid-cure-tb-children>.

<sup>i</sup> WHO TB incidence estimates disaggregated by age group, sex and risk factor. CSV file. Available at: <https://www.who.int/teams/global-tuberculosis-programme/data>

<sup>ii</sup> WHO Global TB Report 2023. Available at: <https://www.who.int/teams/global-tuberculosis-programme/tb-reports/global-tuberculosis-report-2023>