







# Improving Access to HIV Viral Load Test Using Point-of-care Techniques for Pregnant and Breastfeeding Women in Bukedi Region, Eastern Uganda

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#### Introduction

- The Prevention of Mother to Child Transmission (PMTCT) impact evaluation, 2017-2019 in Uganda indicated 56.2% of pregnant and breastfeeding women accessed a viral load test.
- In March 2021, WHO recommended point-of-care (POC) viral load technologies for pregnant and lactating women.
- POC, a new technology helps reduce turn-around time and increases rapid clinical decision-making to prevent vertical transmission.

#### The problem

- MOH scaled up laboratory POC to facilitate timely access to HIV viral load.
- However, less than 50% of pregnant and breastfeeding women tested using POC in 15 districts of Bukedi and Bugisu regions by June 2022.
- This was associated with no performance monitoring system for viral load Sample collection, high dependence on DBS samples, hub riders' schedules of twice a week to spokes, and inadequate laboratory staff.

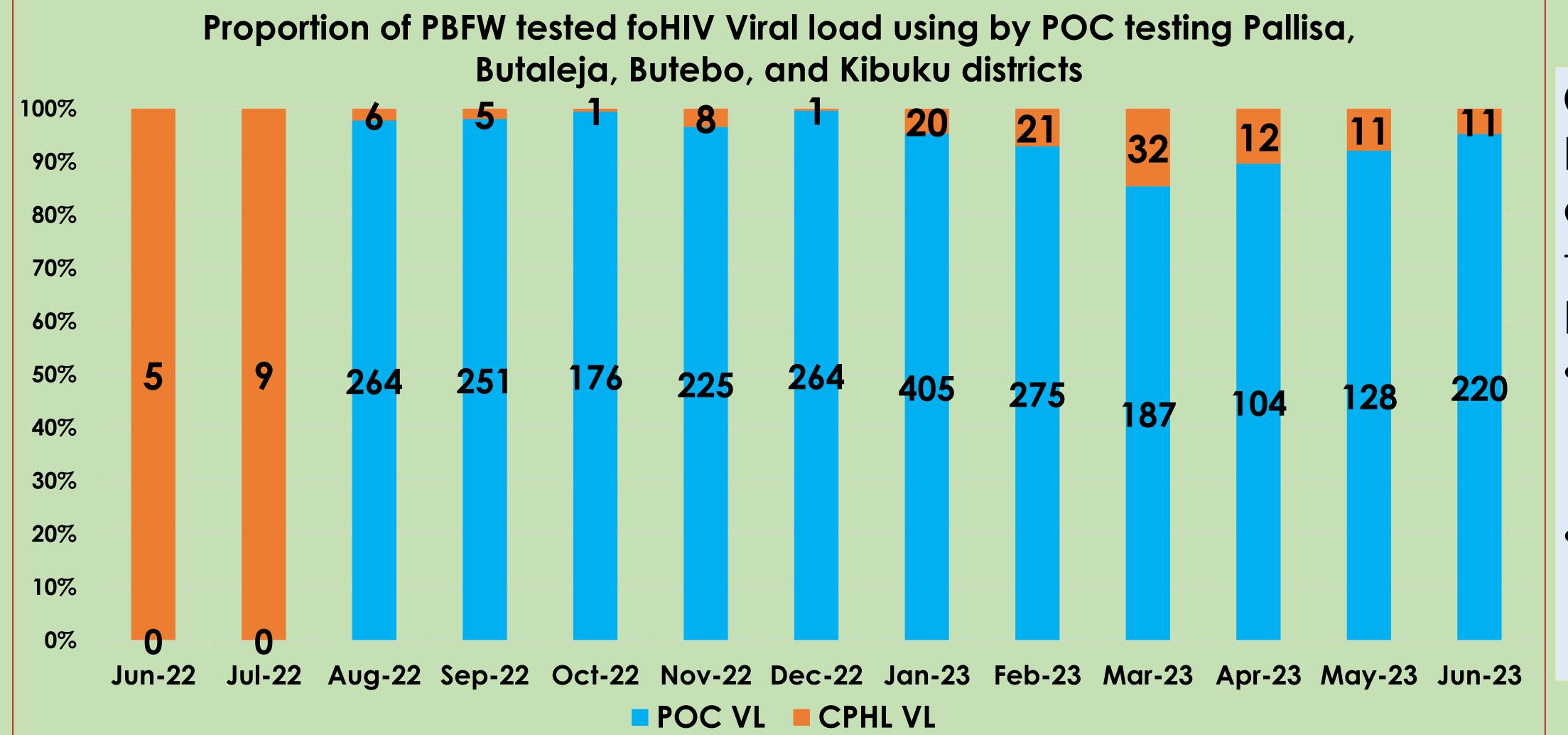


Trainer demonstrates to new lab staff how the MPIMA works at Tororo Hospital , Tororo District.



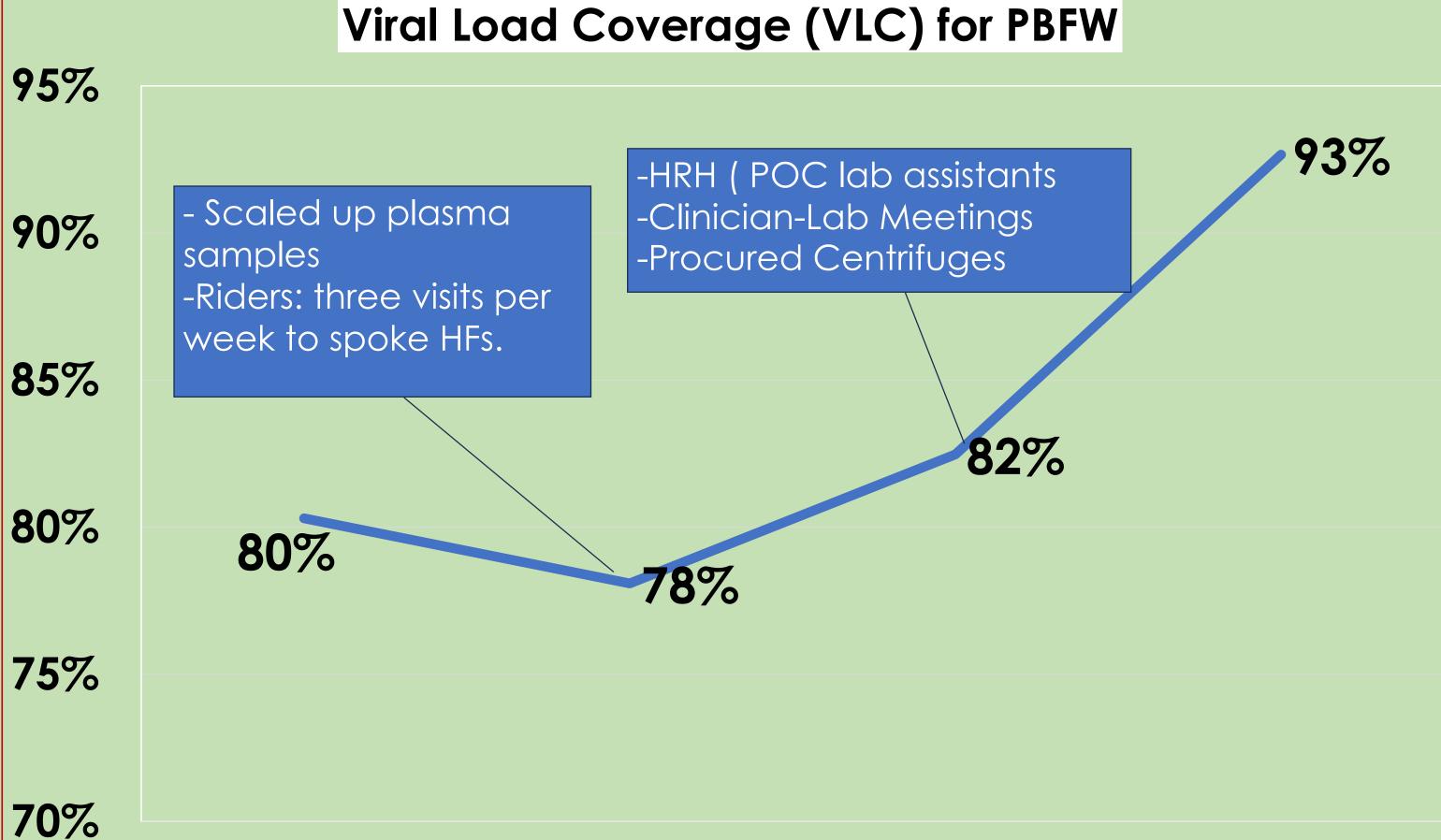
## Results

Pregnant and lactating mothers who accessed POC viral load testing increased to over 95% by June 2023. Viral load coverage for pregnant and breastfeeding women improved from 78% in the quarter of Oct-Dec 2022 to 93% in the quarter of April to June 2023.



### Strategies

- USAID LPHS-E mapped 20 high-volume facilities in Pallisa, Butaleja, Kibuku, and Butebo districts to send samples to use GeneXpert and m-pima at Busolwe Hospital, Pallisa Hospital, Butebo HC IV, Kibuku HC IV, and Nabiganda HC IV
- Conducted Clinician-Lab interface meetings
- Onsite training-use of MPIMA and Genexpert.
- Placed Centrifuges for facilities for plasma preparation
- Engaged health workers in 35 health facilities in Bukedi region
- Scaled up plasma sample collection in peripheral facilities for all pregnant and breastfeeding women and transported them to POC sites for testing.
- Rider made three visits per week to 20 mapped highvolume facilities
- Developed an online weekly reporting system for tests.
- Deployed a Lab Assistant in three high-volume POC sites.



July-sept 22 Oct Dec 22 Jan-March 23 April-June 23

## Conclusions

POC testing improved VL coverage for pregnant and breast feeding women and also reduced turn around time for results.

#### Recommendations

- Scale-up of plasma sample collection improved utilization of POC for viral testing.
- Increased thrice visits a week to high-volume facilities led to improved turnaround time for viral load results.

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