

## Evaluation of Public Private Mix (PPM) for Tuberculosis Control in Urban Setting of Nepal

**Background:** In Asia, 50% or more of such people initially seek diagnosis and treatment from a private medical practitioner (PMP). Evidences suggest that PMPs generally practice poor diagnostic and treatment services of TB. Studies have shown that Public-private partnerships (PMPs) can be used to take advantage of the strengths of various players in TB care.

**Objectives:** To assess sustainability Public Private Mix and to understand the reasons for its success or failures.

**Methods:** The study was conducted in Lalitpur/Nepal. Last ten years cohort data (1998/99-2007/08) analyzed to determine case finding, treatment outcome and patient referral status by using both Key Informants Interview (KIIs) and record analysis of DOTs center registers.

**Findings:** Case detection rate is in decreasing trend after handover to local bodies. Treatment success rates among all forms of TB are > 87% with only 1% default and around 3% failure during 7 years. Treatment outcome among new smear positive cases; cure rates is >85% in all cohort years. Out of total, 27% were referred from PMPs and is steadily increasing over the years.

**Conclusion:** PPM can sustainable with clear roles, strong functional collaboration and coordination among stakeholders. PPM can maintain reasonably good level of case finding, treatment success and a high participation of private sectors focusing on case detection, diagnosis and referring cases to DOTs centers and increasing access to TB services among target population.

