Rationale, aims, and objectives: For a successful patient outcome, a high level of adherence to antiretroviral therapy (ART) is needed. A 2008 report in Tanzania indicated poor clinic attendance and a high lost to follow-up rate as major threats to optimal ART program effectiveness. Most clinics lack a standardized appointment system, which leads to poor records on patients who are expected to attend the clinic. As a result, no one knows if scheduled patients have arrived and no standardized system exists to early track patients missing clinic. Those facilities that do follow patients mainly track those who are categorized as lost to follow-up, when it is already too late to avoid drug resistance and treatment failure. The objective of this study was to assess the effectiveness of strengthening appointment and tracking systems in improving patient attendance at ART clinics in Tanzania as part of people-centered approaches to public health.
Methods: In each of 2 regions, we selected 3 intervention facilities and 1 control facility. Inclusion criteria were facilities that had at least 150 patients on ART and were accessible by the study team. At each facility, we recruited a cohort of 100 patients who had been on treatment for at least 9 months at baseline. The intervention involved introducing a standardized appointment register, negotiating appointments with patients and strengthening linkage with communities to trace patients who missed appointments. The primary outcome indicator was the percentage of patients who missed visits by either more than 3 days or more than 14 days. An interrupted time series analysis was applied and comparisons were made with the control group.

Results: Results showed that in both regions, between 15% and 20% of patients missed visits by more than 3 days each month prior to the interventions. After the intervention, the rate declined to about 11% in Region 1, but did not decline in Region 2 or in the control facilities.

Conclusions: The interventions had some impact on improving appointment-keeping and adherence to ART among patients in Tanzania. Effective appointment systems and strengthening linkage with community programs are feasible and sustainable approaches to reduce high rates of missed visits and enhance people-centered public health.

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