Building Laboratory Capacity in a West Timor Hospital An UnFOHGettable Trip

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(FOHG)

Where is West Timor?



FOHG Flinders Overseas Health Group

- Not for profit organisation
- Collaborative approach to meeting the health needs of rural and urban communities
- Provides professional development for local specialists in multiple areas
- Address resource issues in the hospitals
- Acts as a facilitator for long term networks between Australia and West Timor
- Provides on-going sustainable help
- Multi-disciplinary team



Nusa Timur Tenggara

- One of the poorest provinces in Indonesia
- Average income is 2 400 000IDR/yr (\$240Aus)
- Population of 5.466 million people, 2 million in WT
- Capital of NTT is Kupang pop 500,000
- Catholic (56%), Protestant(35%) and Islam(8%) Vs Indonesia 86% Islam
- Tropical and humid climate. Has dry (March-Nov) and wet (Dec-March) season
- Farming land is on coral and rock soils
- Men & women often leave for work in Malaysia



RSUD Prof. Dr WZ Johannes

- Rumah Sakit Umum Daerah (Public General Hospital) Prof. Dr WZ Johannes
- Main government hospital for NTT
- Additional Army Hospital and Police Hospital
- Well funded by NTT standards
- 3-4 medium sized private hospitals in Kupang, with laboratories of varying quality.
- 350 bed multi-disciplinary hospital

Main corridor





Emergency Department





Surrounding buildings





Hospital Canteen



Clinical Pathology Department

- Approx 15 laboratory staff
- 3 Pathologist (1 Microbiologist)
- 2 "analysts" in Microbiology
- Work load Microbiology past 6 months = Total 580 specimens
 - Positive Urines, 69
 - Positive Pus, 107
 - Positive Sputum, 67
 - Positive Blood culture, 317
 - TB smears, 1000 patients.











Lab handwashing facilities









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Overall aims

- Primarily to upskill Microbiology Lab Staff
- Increase utilisation of the lab by clinicians in the hospital.
- Provide methods and guidelines for the lab
- Troubleshoot current problems
- Deliver lectures for trainee "analysts" at the polytechnic
- Provide some equipment

Equipment

- Biomerieux Vitek 2 compact
- Biomerieux BacT Alert
- GeneXpert
- Sysmex urine analyser for chemistry and counts
- Centrifuge
- Incubator
- Media sterilizer
- Hot air oven
- Fridge –freezer
- Leica Microscope
- Oxoid disc dispenser

Vitek

- No error manual in Bahasa Indonesian
- Very limited instructions in Bahasa
- Contamination of saline dispenser
- Procurement is difficult
- Lab heavily reliant on the Vitek for ID

BacTAlert

- Lack of training and instruction in Bahasa
- 14 samples per week (120 cell capacity)
- Primarily NICU samples
- O₂ or paediatric bottle only no ANO₂
- Small volumes collected low yields
- No direct susceptibilities performed
- High rate of contamination-15% grew STCN
- Inexperience with direct gram staining

Media available

- Blood agar (previously made with human blood from expired blood bank bags, now receive sheeps blood once a fortnight)
- Chocolate agar
- MacConkey 3 agar
- Mannitol Salt agar
- Saline
- Blood culture bottles









TB in the lab

- 20-25 samples per day
- 2-3 positive per day
- No culture or sensitivity testing performed
- X 3 Specimens delivered often in person
- Patients wait for their results
- Biological Safety Cabinet x2 now installed
- Given Fixed Dose Combination (FDC)
 treatment of 4 drugs x 3 per week
- Oncology patients given a chest X-ray

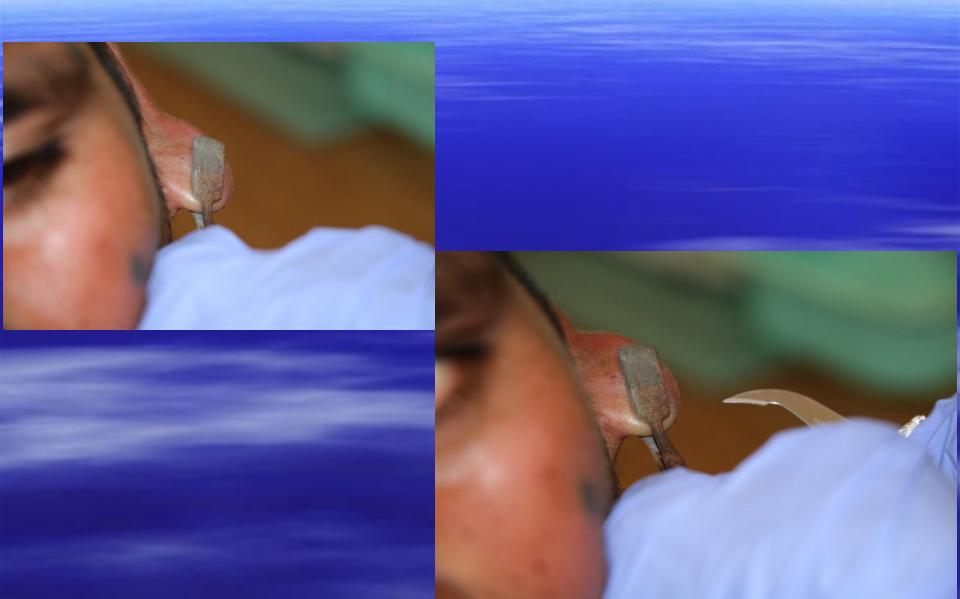
Previous TB processing



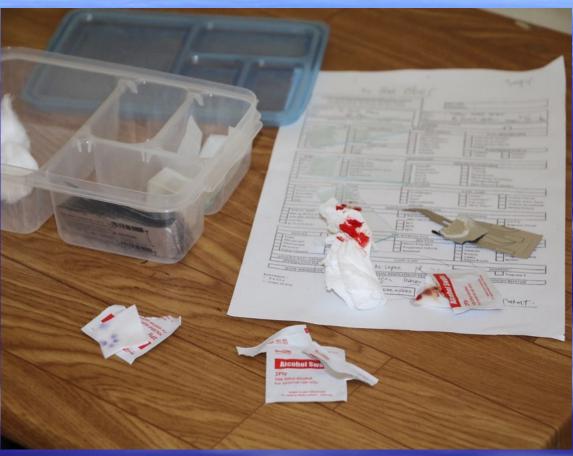
Leprosy

- 1-4 specimens per week
- 0-1 positive per week
- Patients have a slit smear performed in lab
- Patient examined for Leonine facies (face that resembles that of a lion) and or lesions
- Questioned about loss of feeling
- Wait for their results

Slit-skin smear













Antimicrobial resistance



Antimicrobial Data previous 6 Months

- Total 23 E.coli isolates
- 11 ESBL (2 CPE)
- Total 50 *K. pneumoniae* isolates
- 25 ESBL (2 CPE)
- Total 32 Staph aureus isolates (40%MRSA)
- 14 Acinetobacter/Pseud isolates varying Resistance patterns
- No Enterococcus isolated!

Other tests

- HIV (rapid test) confirmed by EIA
- HepBsAg & Hep C EIA
- Syphilis RPR
- No testing for Japanese encephalitis,
 Chikungunya virus etc. referred to Jakarta
- Dengue testing available through Private Pathology Lab
- Rabies recently introduced from Flores

Whole Genome Sequencing





Recommendations Lab

- Alerts placed on Vitek as prompts
- Implement anaerobic culture
- Guidelines introduced for sensitivity testing
- QC sheets drawn up and implemented
- Improve isolation/identification of Streps
- Improve microscopy genital specimens
- Education of nursing staff in collection of Blood cultures

Future FOHG

- FOHG hope to continue links with lab and gain further funding
- Ongoing support for the Oncology unit
- Develop Antimicrobial stewardship program
- Further develop Infection Control policies
- Ongoing support of Soe Hospital (Muder Ignacia Hospital)
- Develop further relationships within the ministry of health e.g. Cancer council

Terima kasih

