Using Predictive Models & Risk Assessment tools to Find Unreported TB Cases.



Global Digital Health Forum 08/12/2020





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Objectives of the lab session

At the end of today's presentation;

- Learn how to interpret the incidence predictive maps
- understand different factors that can be used to predict TB incidence.
- design disease screening missions.
- create a risk assessment questionnaire, and automate results
- understand how to review analytics and interpret results from the field



3.6 million cases of Tuberculosis are missing yearly.

Health workers have difficulty identifying communities to focus surveillance efforts such as active case finding.

MediScout supports **timely detection, reporting, & referrals of missing cases** to diagnostic & treatment services.

Source-https://www.cdc.gov/globalhivtb/who-we-are/resources/keyareafactsheets/finding-the-missing-4-million.pdf

Solution Suite



Local TB incidence rate predictions

(to determine communities to focus interventions)

Enquête Do you present the following symptoms (multiple answers allowed) Cough for more than two weeks Unexplained weight loss Night sweats Unexplained fatigue Blood in sputum



GIS enabled monitoring of CHWs activities & real-time data analytics

With Triage capabilities to enable referrals of only the at-risk people.

Use Case...



More missing TB cases detected for treatments (10X more than previous year)

High-risk communities accurately identified

4X more cases found in at-risk communities identified.

High-risk persons identified & referred

Mobile app risk assessment correlated well with TB positivity rate.

CHWs performance improved

screened 3X more patients

The Incidence Maps

Estimation of local disease risk

Data used

Openly available datasets:

- Population distribution
- Amministrative and health borders
- Location of mines and health facilities
- Satellite images

(Woldpop, WHO, Openstreetmap, IPIS, other)

Local (*aggregated*) reports from the **local health system**.



Models

Epidemiology inspired model to estimate the distribution of cases on the area of interest;

Satellite images analysis to reveal highly populated neighbourhoods in cities.

Self training model from **Bayesian statistical inference** to learn from collected data

Compartmental inspired model

Disaggregate local health system reports.

Model assumption: *highly populated* areas have higher incidence rate.

Compartmental models (e.g. SIS) in epidemiology show a dependency of the **incidence rate** at the equilibrium on the **density of population** (average number of contacts per time).



The model parameters depend on the population density. Below a certain threshold the disease is expected to extinguish.

Satellite imagery

Computer vision techniques

Edge detection on

highly detailed satellite imagery within cities.

Detection of **highly populated** (high density of buildings) **neighborhoods**.



Automatic learning from collected data

Bayesian (statistical) inference:

- Estimated rate as **prior** (our beliefs);
- Mediscout collected data represents the evidence;
- **Posterior** distribution (beliefs corrected by the evidence).



South Kivu Pilot case

Comparison to local reports, we could find up to 10 folds the reported cases



Need Number to Screen

to find one positive case





Questions?

Lab session instructions

Get Started

Prediction maps

Identify hotspot areas for missing cases

Url to worldmap : <u>https://maurofaccin.github.io/cartotb/en/worldmap/</u>

Program manager

Design, plan & monitor missions

Url = <u>https://mediscout.org/sign</u>

Username = <u>mediscoutgdhf@gmail.com</u>

Password = labsession

Community health worker

Perform screenings in the field

Search for "MediScout" on the PlayStore: Play Store



Design a screening mission

Design Questionnaire

Url = <u>https://mediscout.org/sign</u>

Username = <u>mediscoutgdhf@gmail.com</u>

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Password = labsession

- Select "Surveys" to create a new screening tool
- 2. **"Activate thresholds"** for auto-scoring
- Select question type e.g.
 "Multiple choice" questions
- 4. "Save" Form

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Design a Screening Mission

- 1. Select "**Missions**" from the Menu bar
- Select "Screening" as type
- 3. Type in **location** and select **radius** to get the GIS coordinates
- 4. "**Name**" the mission and add a **description**
- 5. Input the "**total no of** screenings"
- 6. Input the "duration"
- 7. "Submit" form

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Approve CHWs

- 1. Select "**Agents**" from menu bar
- 2. Click on the "**green** icon" to approve CHWs

| G G | REQUESTS RECRUITS MANAGERS | ۵ ۱۹۹۹ - ۲۰۰۹ ۱۹۹۹ - ۲۰۰۹ - ۲۰۰۹ - ۲۰۰۹ - ۲۰۰۹ - ۲۰۰۹ - ۲۰۰۹ - ۲۰۰۹ - ۲۰۰۹ - ۲۰۰۹ - ۲۰۰۹ - ۲۰۰۹ - ۲۰۰۹ - ۲۰۰۹ - ۲۰ |
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| OBGANIZATIONS SURVEYS | TB screening of adults in Lagos ola testing | 0 0 |
| MISSIONS | Applied on: November 25, 2020 | iont - |
| AGENTS | | |
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TB Screening

Create an account

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Search and download "**MediScout**" on the Google Playstore

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<u>Link</u>

"Create an account" to log in to the app

Find Open Missions







From the **Menu bar**; select "**Open Missions**" to view organizations & available missions

"**Request to Start**" mission and await approval by an Admin

Report a Screening



"+" button beneath to start

screening

Mining area **Result Survey** 11/21 Unique ID AADO-0-M-20 Result Survey Tuberculosis very likely Recommended action-Collect sputum samples for lab test OK 1 Select responses to all questions and submit

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Do you live (or have you lived) in a place

considered a priority for TB control?

Review Results

Review screening reports

- 1. Go to "**Mission"** from the menu bar
- Select a mission from
 "Ongoing missions" or
 "completed missions"
- 3. Click on "**Surveys**". To see the line list of screening reports
- 4. Select any report to view detailed responses.

| $\leftarrow \ \rightarrow$ | C à | geoscout.org/details/survey | s/5fc9cfda3c6ac046e2216a94 | | | | •• ₩ ☆ ❷ : |
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| 9 | Q | Search a survey | | | | | × |
| 57 11 | ň | Respondent Unique ID | Position | Score | Results | Filler Unique ID | Creation date 1 |
| 2 | 1 | AACV-41-M-95 | Latitude: 50.8278369 Longitude: 4.3999203 | 1 0 | TB unlikely -low risk | AACV | 04/12/2020-07.02 |
| - | 2 | AACV-42-F-87 | Latitude: 50.8278221 Longitude: 4.3999392 | 5 | TB probable - medium risk | AACV | 04/12/2020 - 07.03 |
| 22 | 3 | AACV-43-F-91 | Latitude: 50.8278525 Longitude: 4.399954 | g | TB probable - medium risk | AACV | 04/12/2020 - 07:04 |
| | 4 | AACV-44-M-71 | Latitude: 50.8278524 Longitude: 4.3999735 | 12 | TB possible - high risk | AACV | 04/12/2020 - 07:05 |
| -+ | 5 | AACV-45-F-90 | Latitude: 50.8278625 Longitude: 4.3999485 | 0 | TB unlikely - low risk | AACV | 04/12/2020 - 07:11 |
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- 1. Go to "**Mission"** from the menu bar
- 2. Select the mission you would like to review
- 3. Click on **"Statistics".** This displays different charts computing data from screenings e.g
 - a. No of screenings by threshold
 - b. Screenings by gender/age

Check stats



Export data

You can export or view field reports of ongoing missions & Completed missions

- 1. Go to "**Mission"** from the menu bar
- 2. Select the mission you would like to review
- 3. Click on **"Export** results".





Review CHW progress

To review progress of a CHW;

- 1. Go to "**Mission"** from the menu bar
- 2. Select the mission you would like to review
- 3. Click on **"Members".** You will see
 - a. no. of screenings
 - b. recommendation received,
 - c. risk levels of patients s/he screened.



Review all missions report

- By checking the overall dashboard, you can have access to the results linked to a specific survey
- 2. If you would like to go more into detail, you can access the "**Mission"** from the menu bar



Any questions?

Thank you for your time!

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