

P201 RAPID SURVEY OF TB/HIV MEDICAL SERVICES IN SOUTH AFRICAN MINES

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Objectives There is a legal requirement to provide medical surveillance for tuberculosis (TB) in mines. The HIV pandemic in South Africa is complicated by TB and mines have no legal requirement to monitor, test and treat HIV. A rapid survey was undertaken to describe provision of medical services for TB and HIV in the mines and estimate TB and HIV prevalence by commodity and size of mines.

Methods 61 mines and works were selected by randomised stratified sampling by commodity from a database provided by the Department of Mineral Resources.

Results Only 40% of visited mines provided services on site. Of the 60% of mines with no service on site, 16% outsourced services. Overall, 51% did not provide a service, relying on government healthcare. Among visited mines, 38% provided HIV services on site and 55% referred miners to government services for testing and counselling. Large mines were more likely to provide services, for example, 68% provided HIV counselling, testing and treatment, and 62% gave NHI prophylaxis for positive workers. TB surveillance was conducted in 84% of mines and treatment provided by 32% of these mines. The gold mining industry had highest prevalence of pulmonary TB, 2610 per 100 000. They also reported cases of MDR and XDR tuberculosis.

Conclusions Poor management of TB and selective testing for HIV in larger mines adds to disease burden. Standardised approach to treatment and monitoring of cases required by mines and should be strongly regulated by the government.