An analysis of routine TB/HIV data collected on ETR.net was made to assess the trends for the 5-year period 2008 to 2012.

Although nationwide rollout of ETR.net was complete by 2008, utilization was not consistent. As such, dual recording and reporting (paper and electronic) was maintained while strengthening ETR utilization.

In 2008, 77% (10526/13727) of registered TB patients were entered in the ETR.net. Of these, HIV testing was documented for 8644 (82%), compared to 67% in the paper register. Documentation for HIV testing increased to 89% in 2012 with over 97% ETR.net coverage. The proportion initiated on ART also increased significantly over the 5 years from 27% to 71%. Further increases were noted on Cotrimoxazole Preventive Therapy coverage, from 54% to 98%. HIV prevalence has remained lower than that in paper tools, which had reported lower testing rates anyway. This is consistent with the decline in prevalence. In practice ETR.net data on TB/HIV was more up to date than in paper registers. However, the ETR.net is reporting IPT provision as a proportion among TB patients with HIV, which is inappropriate.

**Results**

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**Conclusions and recommendation**

ETR.net provides an opportunity for more comprehensive and updated capturing of specific data on TB/HIV. TB/HIV collaborative activity reports can be generated at the click of a button and used for resource mobilization and advocacy purposes.

ETR.net prompts completeness of data and facilitate timely reporting.

However, data on IPT were often difficult to interpret, because of the absence of an appropriate denominator.

Future possibilities are that ETR.net be link to the Electronic Patient Monitoring system (EPMS) capturing data for HIV care.

ETR.net is a valid data source for TB/HIV indicators and is recommended for use by National Tuberculosis Program.

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