Operation ASHA: An Effective, Efficient, and Scalable Model for Tuberculosis Treatment

“I know the color of that blood; it is arterial blood. I cannot be deceived in that color. That drop of blood is my death warrant. I must die.”

—John Keats, 1820. (The British poet died of tuberculosis at the age of 25)

The year was coming to a close, and the founders of Operation ASHA (OpASHA), CEO Sandeep Ahuja and President Shelly Batra, were looking back on their accomplishments; 2012 had been a great year for the nongovernmental organization (NGO). OpASHA had won the Wall Street Journal Technology Innovation Award in the health care category. Bill Gates tweeted “@MSFTResearch has teamed up with @OperationASHA to fight#TB in India. Better data = better outcomes.” And Ahuja and Batra were invited to a number of national and international forums to talk about their work on tuberculosis treatment in India. The publicity enhanced OpASHA’s profile, but Ahuja and Batra worried about sustainability. The government of India provided funding for diagnostics and medicines, but financial support for health care start-ups was rarely offered, and funding gaps constrained OpASHA’s scalability. While lobbying the government for support was one route, Ahuja wondered if OpASHA could leverage its key assets and capabilities to generate additional sources of revenue. As multidrug-resistant TB (MDR-TB) began to rear its ugly head in India, Ahuja and Batra questioned if OpASHA, which until now had focused its efforts on drug-susceptible TB, should take up the task of addressing drug-resistant strains. Not only would OpASHA need a modified service delivery model, but its financing needs would be also higher, increasing the urgency to find pathways to sustainability. Parking their car at the shopping center, Batra and Ahuja proceeded to their favorite restaurant for lunch.

Tuberculosis

Tuberculosis (TB) is an infectious disease caused by Mycobacterium tuberculosis. The bacterium commonly affects the lungs, leading to pulmonary TB, but it can affect other parts of the body. Most infections in humans are asymptomatic (latent), especially in otherwise healthy persons; the human immune system “walls off” the bacteria. About 1 in 10 latent infections eventually progresses to active disease, which if left untreated can be fatal. Symptoms of pulmonary TB include coughing, sometimes with sputum or blood,