



TBWIRE

THE U.S. PARTNER IN THE GLOBAL
STOP TB PARTNERSHIP

November 12, 2013

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For our readers: Please feel free to forward the TB Wire to others who may be interested. If the file is too large to send, you can refer others to [Stop TB USA SIGN UP](#) where they can sign up to receive it (and other Stop TB USA communications) directly. The Stop TB USA Facebook link is now available on the header above and Stop TB USA is on twitter as well: [@StopTBUSA](#).

As always, suggestions and comments are welcome and appreciated at setkind@stoptbusa.org.

WASHINGTON UPDATE

Thanks to Nuala Moore for the following updated information. Nuala is the Senior Legislative Representative at the American Thoracic Society Washington Office.

Domestic TB Funding Update

The new bicameral House-Senate budget committee, chaired by Sen. Murray (D-WA) and Rep. Ryan (R-WI), is working to draft a plan on final FY2014 funding and other long-term budget issues, including sequestration, by December 15, 2013. If a new plan is not produced by this committee by December 13, budget sequestration funding cuts of 5 - 7% will be implemented across the board to all federal agencies, including the NIH and CDC, on January 15, 2014, with the exception of the Veterans Dept. and some safety net programs such as food stamps. The fiscal year 2015 budget process will begin in February 2014, when the President releases his proposed budget for the year.

ANNOUNCEMENTS

Stop TB USA Coordinating Board vacancy: Stop TB USA currently has a vacancy on the Coordinating Board. The Board functions include responsibility for: overall policy and direction of the Partnership; provision of leadership, direction and monitoring of the implementation of the Partnership's annual work plan as well as any significant Work Plan additions, deletions or other key modifications during the work year; management oversight of and approval of the work of the Executive Director/Secretariat

(ATS); review of the progress of the implementation of the Stop TB Partnership; maintenance of a program of frequent, high quality information exchange, including reports of its meetings, with all Partners and the public at large; approval and adoption of an appropriate financial policy in collaboration with the Secretariat/ATS to underpin financial decisions and accounting for any resources entrusted to the Stop TB Secretariat; and recommend and/or amend and enforce the Bylaws that are in effect. Participation in monthly conference calls and 2 face-to-face meetings per year are required.

If you are interested in being considered for this position please forward your CV to Sue Etkind setkind@stoptbusa.org by **December 1, 2013**.

HIGHLIGHTED TB REPORTS

Activists storm stage at World Conference on Lung Health: Tuberculosis (TB) activists and representatives of affected communities stormed the opening of the Stop TB Symposium at the World Conference on Lung Health in Paris, demanding faster progress towards eliminating TB and a target of zero TB deaths. After the activists had marched onto the stage, Colleen Daniels of Treatment Action Group took to the microphone to challenge the delegates assembled to be more ambitious and aim for zero TB deaths, zero new infections and zero suffering and stigma. The demonstration and address earned applause from the audience, with the majority taking to their feet in support. For the first time, the International Union Against Tuberculosis and Lung Disease awarded 100 free registrations to the conference for civil society delegates and representatives of communities affected by TB...View photos of the demonstration on [Flickr](#) and the actual video from the Treatment Action Group (TAG) <http://www.treatmentactiongroup.org/tb/zeroes-campaign>

FROM THE CDC, Division of Tuberculosis Elimination, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention

- 1) Availability of an Assay for Detecting *Mycobacterium tuberculosis*, Including Rifampin-Resistant Strains, and Considerations for Its Use — United States, MMWR Recomm 2013 Oct 18; 62 (41) <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6241a1.htm>
- 2) [Provisional CDC Guidelines for the Use and Safety Monitoring of Bedaquiline Fumarate \(Sirturo\) for the Treatment of Multidrug-Resistant Tuberculosis](#). MMWR Recomm Rep. 2013 Oct 25;62(RR-09):1-12.
- 3) [TB in Correctional Facilities Is a Public Health Concern](#)
- 4) [Reported Tuberculosis in the United States, 2012](#)
- 5) Quick Stats: Age-Adjusted Death Rates from Tuberculosis, by Race and Sex – National Vital Statistics System, United States, 1999-2010 [full text](#)

RELEASE OF THE WHO GLOBAL TB REPORT (and Responses)

The WHO released its global TB surveillance report for 2013. The report shows progress and challenges

in the fight against TB, with a slight reduction in deaths, from 1.4 million in 2011, down to 1.3 million in 2012. It shows that the TB mortality rate has been reduced by 45% so the world is on track to meet the goal of a 50% reduction in TB deaths by 2015. However, progress towards addressing drug resistant TB is “far off-track.” Less than 25% of people with MDR were detected in 2012. The report also includes data by region and country. The link to the full report along with a press release and new factsheet is below.

<http://www.who.int/mediacentre/news/releases/2013/tuberculosis-report-2013/en/index.html>

[Global Tuberculosis Report 2013](#)

Responses:

RESULTS:

ACTION <http://www.action.org/newsroom/press-releases/actions-response-to-new-who-global-tb-report-tb-progress-fragile-globa>. 10/23/2013 04:04 AM EDT

"TB anywhere is TB everywhere. . .": The World Health Organization Releases Critical Report on Tuberculosis

ACTION, a project of RESULTS Educational Fund and a global partnership of advocacy organizations working to influence policy and mobilize resources to fight diseases of poverty and improve equitable access to health services, has issued a response to a sobering report, released today by the WHO, which outlines the "slow and fragile progress" in the effort to end the scourge of TB. By extension, the report underscores the critical need for the Global Fund replenishment conference on December 3 to be a huge success. www.results.org/blog/who_global_tuberculosis_report_2013

Huffington Post: [Drug-Resistant TB a “crisis” – So Now What?http://www.huffingtonpost.com/kolleen-bouchane/drugresistant-tb-official_b_4149562.html](http://www.huffingtonpost.com/kolleen-bouchane/drugresistant-tb-official_b_4149562.html)

Reuters: [Rising Drug Resistance Threatens Global Progress Against TB](#)

Wall Street Journal:<http://stream.wsj.com/story/latest-headlines/SS-2-63399/SS-2-362167/>

BBC:<http://www.bbc.co.uk/news/health-24625816>

FROM THE STOP TB PARTNERSHIP:

1) **Global Fund funding changes for TB and HIV:** In a major step forward for people affected by tuberculosis (TB) and HIV co-infection, the Global Fund to Fight AIDS, Tuberculosis and Malaria has made a bold change to the way it approaches treatment programmes in countries with high rates of both diseases. The strategy committee of the Board of the Global Fund has decided that, in future, any country with high rates of TB and HIV co-infection that applies for funding for treatment programmes will have to design its programmes in a single unified application for joint TB and HIV programmes, rather than submit separate proposals for each disease. The new requirement is designed to streamline programming for countries heavily burdened by the two diseases. “This is a huge leap forward,” said

Lucica Ditiu, Executive Secretary of the Stop TB Partnership. “We have known for some time that if we can scale up collaborative activities, TB needn’t be a death sentence for millions of people living with HIV. This decision takes us from knowledge to action.”

2) Mining executives agree strong corporate voice on TB needed: With a TB and Mining Regional Summit planned for 2 February 2014 in Cape Town, mining company representatives have agreed to hold discussions on how to highlight and strengthen corporate sector contributions to addressing tuberculosis (TB) in the mining sector. The chief executives of mining companies plan to come together around the Summit to discuss and agree on ways in which the private sector can collectively mobilize efforts against TB, in partnership with government and other stakeholders and partners. Their discussions will be part of a series of events focusing on TB in the mines in January and February 2014, including the Stop TB Partnership Coordinating Board meeting, the Annual Africa Mining Indaba and the planned Regional Summit on TB in the Mining Sector.

RELATED ARTICLE FROM TAG:

The International Journal of Health Services article on the reduction of TB in the mines in South Africa and elsewhere.

[\[ASPIRING TO ZERO\]](#)

FROM TAG and THE STOP TB PARTNERSHIP:

The [2013 Report on Tuberculosis Research Funding Trends, 2005–2012](#) found that funding for tuberculosis (TB) research and development (R&D) dropped by US\$30.4 million in 2012 compared to 2011, the first time funding has fallen since Treatment Action Group (TAG) began tracking investments in 2005. The report, published by TAG and the Stop TB Partnership shows annual investments by the world’s leading donors to TB R&D, and compares current spending levels with R&D funding targets outlined in the Stop TB Partnership’s *Global Plan to Stop TB 2011–2015*. Total funding of US\$627.4 million for TB R&D in 2012 means that there is a gap of some US\$1.39 billion compared to the US\$2 billion funding target called for by the Global Plan. Reported funding fails to meet targets in all five key research areas tracked by the TAG report: basic science, diagnostics, drugs, vaccines, and operational research.

FROM RESULTS:

“Lessons from Tuberculosis Clinic: Pulling Down the Curtain Between Doctor and Patient” By Charity Thoman

<http://www.independent.com/news/2013/oct/16/lessons-tuberculosis-clinic/>

FROM ROBERT WOOD JOHNSON (RWJ):

New Report: High Job Satisfaction Among Public Health Nurses, But Many State Health Departments Struggle to Fill Vacancies

Princeton, N.J. Public health nurses play an essential role in improving the population's health and delivering essential health services to communities, but the public health nursing workforce is facing significant challenges. More than two in five state health departments report having "a great deal of difficulty" hiring nurses and nearly 40 percent of state and local health departments report having insufficient resources to fill vacant nurse positions. Those are among the findings of a report released today by the Robert Wood Johnson Foundation (RWJF), which provides the first comprehensive assessment of the size, composition, educational background, experience, retirement intention, job function, and job satisfaction of nurses who work for state and local health departments.

[\[State Health Departments\]](#)

FROM FRIENDS OF THE GLOBAL FIGHT:

Friends of the Global Fight has released a report titled [*Steps Toward Sustainability: Stories of Progress in Domestic Responses to AIDS, Tuberculosis and Malaria.*](#)

FROM MEDECINS SANS FRONTIERES (MSF):

1) **3rd Edition of DR-TB Drugs under the Microscope.** The report focuses on just some of the many factors that hamper the scaling up of DR-TB treatment – the limited availability and high cost of quality-assured medicines for resistant strains of the disease, owing to an insecure market and insufficient demand; and the research questions that remain unsolved with existing medicines. Also, as the R&D pipeline prepares to deliver the first new compounds for TB in close to half a century, the report provides an initial assessment of the approaches to be taken in order to radically transform our ability to respond to this plague. The report: <http://www.msfacecess.org/content/dr-tb-drugs-under-microscope3rd-edition>

3) **Africa: First New TB Drug in 50 Years Risks Being Squandered Without Better Research and Pricing Strategies** <http://allafrica.com/stories/201310301277.html>

4) **The next stage of the "Test Me, Treat Me" DR-TB Manifesto** We are opening up the online campaign for the general public to join, so that those who wish can support a call for urgent action to deliver improved DR-TB care. Please visit the new website, sign the manifesto and share broadly (including hashtag #TBmanifesto if you use twitter): <http://www.msfacecess.org/TBmanifesto>

FROM THE INFECTIOUS DISEASES SOCIETY:

The Global Fund: <http://sciencespeaksblog.org/2013/10/30/sachs-as-global-fund-replenishment-comes-to-washington-the-money-is-not-in-the-bag/>

FROM GLOBAL CALL TO ACTION:

(Washington, D.C.) With less than 30 days until President Barack Obama and the United States Government hosts the Global Fund Replenishment Event on 3 December 2013, Archbishop Emeritus Desmond Tutu, Honorary Chair of the Endgame Campaign, calls on our Movement to work together to

beat AIDS, TB, & Malaria. Feel free to share this "Call to Action & Message of Hope" to support your personal and/or organizational efforts. Mobilization efforts are intensifying around the World to ensure commitments of at least \$15 billion are made by World Leaders from implementing governments; BRICS governments; traditional donor governments, the private sector, and high net-worth individuals. We Can! We Will! Beat AIDS, TB, & Malaria!! [Beat AIDS, TB and Malaria by Archbishop Emeritus Desmond Tutu](#)

FROM RESULTS:

Sign on letter from the Frontline Health workers Coalition: [\[HealthWorkersCount\]](#)

NEWS RESOURCES

FROM THE NATIONAL PREVENTION INFORMATION NETWORK (NPIN):

UNITED STATES

FLORIDA: Possible Tuberculosis Exposure Under Investigation at St. Lucie County Jail WPTV.com (Palm Beach) (10.23.2013) :Angie Fajardo

The St. Lucie County Sheriff's Office and the Florida Department of Health are investigating a possible TB exposure that might have occurred at the St. Lucie County Jail in Fort Pierce, Fla. According to the health department, an individual tested positive for the virus when admitted to the jail on August 3 but tested negative during follow-up screening performed on August 12. The individual remained in custody until September 25. The health department, in conjunction with the Sheriff's Office and Corizon Medical, is working to determine whether any TB exposure occurred while the individual was in the facility.

Focusing on testing those who had direct contact with the infected prisoner, St. Lucie County Administrator Larry Lee noted in a written statement that "The health and safety of staff and inmates are a top priority, and we are doing everything necessary to address the situation in cooperation with the Sheriff's Office." [Read Full Article](#)

MICHIGAN: Michigan gets \$3.6 million contract for TB testing, John Flesher Associated Press, Oct 24, 2013The Michigan Department of Community Health's Bureau of Laboratories is getting a \$3.6 million contract to test tuberculosis specimens from around the country. The funding for Mycobacterium tuberculosis genotyping for the Centers for Disease Control and Prevention was announced Thursday. Community Health Director James K. Haveman said in a statement that Michigan is poised to be a "global leader" in the work. The state has been involved in such testing since the 1990s. Mycobacterium tuberculosis is the organism that causes tuberculosis. Michigan typically reports about 120 TB cases each year. TB is spread through the air, and officials say genotyping results can help establish links between one patient and another. The work can help prevent further spread of the illness. The CDC contract runs through November 2017. Read more:

<http://www.hollandsentinel.com/news/x529843931/Michigan-gets-3-6-million-contract-for-TB-testing#ixzz2jEbOdGhN>

NEW YORK: Manhattan Hospital Worker May Have Exposed Hundreds of Babies to Tuberculosis, Corky Siemaszko, New York Daily News (10.31.2012) The New York Daily News recently reported that on October 30, St. Luke's-Roosevelt Hospital began to notify parents that a maternity ward worker could have exposed their newborns to TB. St. Luke's-Roosevelt Hospital stated that previous TB tests and an employee health survey did not indicate the worker was infected. Although the hospital did not specify how long ago exposure could have occurred, parents who contacted NBC 4 New York reported their children were born more than two months ago. Hospital officials tried to reassure parents that it was unlikely their children had TB because transmission usually occurred only after several hours of continuous exposure. The hospital offered free TB testing for the babies or reimbursement for private physician testing. According to a statement from St. Luke's-Roosevelt, patients who did not receive a notification in the "next few days" were not in contact with the infected worker. Hospital employees who could have been in contact with the infected worker were receiving evaluation, testing, and follow-up. Data released by the New York Department of Mental Health and Hygiene in June indicated high TB prevalence in the 10457 ZIP code, which included Tremont and parts of Crotona, Beltona, and Claremont. New York's last TB epidemic occurred in 1994. Although TB usually is curable if detected and treated, the World Health Organization reported that drug-resistant strains killed approximately 2 million people annually worldwide. [Read Full Article](#)

GLOBAL

SOUTH AFRICA: SA Tops List with Highest TB Rates IOL News (10.24.2013):Sipokazi Fokazi.

A World Health Organization (WHO) report designated South Africa as one of 12 countries with the highest TB burden and predicted that South Africa would not meet its Millennium Development Goals of cutting TB prevalence and mortality in half by 2015. Of Brazil, Russia, India, China, and South Africa—the BRICS nations—Russia and South Africa had the worst TB scores. Although Russia had made more progress in reducing TB incidence, South Africa had a 77-percent treatment success rate compared to Russia's 65-percent success rate.

WHO reported a 45-percent decrease in TB mortality worldwide throughout the last two decades, but stated that incidence had not decreased quickly enough. Globally, new TB cases reached approximately 8.6 million diagnoses last year; approximately 1.1 million of these individuals also had HIV.

WHO estimated that 530,000 new TB infections occurred among children, and 74,000 children not infected with HIV died of TB. In 2012, 170,000 of the 450,000 people who developed multidrug-resistant TB died. Although more men than women died of TB in 2012, TB continued to be one of the top three mortality causes among women worldwide. Last year, 410,000 women died of TB. The report estimated that South Africa and 11 other high-incidence countries had failed to diagnose or report approximately 3 million TB cases to national TB control programs.

The report predicted increased TB incidence in South Africa and called for "greater engagement" between government, nongovernmental organizations, and the private sector. Doctors Without Borders stated that governments' failure to improve TB diagnosis and treatment was a global crisis. [Read Full](#)

[Article](#)

UNITED KINGDOM; UNITED STATES: TB Insights into How TB Tricks the Immune System Could Help Combat the Disease Medical Xpress (10.23.2013)

TB bacteria cause persistent TB infection by living in macrophages, the immune system cells that usually destroy invading microorganisms. Researchers from Imperial College London and California's Stanford University have discovered how unusual sugars on the surface of the TB mycobacteria help them fasten onto the macrophages and prevent the macrophages from attacking. The researchers hope that this discovery can help in developing small molecule drugs that attach to the same site and fight TB. The drugs could function by creating a barrier to prevent the mycobacteria from attaching to the macrophages, transporting drugs to kill the mycobacteria, or changing the macrophages' behavior and causing them to destroy the mycobacteria. Kurt Drickamer, professor at the Department of Life Sciences at Imperial College London and the study's lead author, commented that the researchers were surprised to find an extensive interaction between the macrophage and a specific type of molecule on the surface of the mycobacteria.

The researchers believe they could use the new insights into how macrophages can be switched on and off to provide better vaccines against many diseases. Although animal vaccines use mycobacteria to attract macrophages, this method was considered to be too toxic for human use. Dr. Maureen Taylor, also from Imperial College London's Department of Life Sciences and co-author of the research, noted that scientists might be able to use the new, simpler molecules described in the research to overcome the problem of creating an immune system response to develop vaccines against many diseases.

The full report, "Mechanism for Recognition of an Unusual Mycobacterial Glycolipid by the Macrophage Receptor Mincle," was published in the Journal of Biological Chemistry (2013; 288(40):28457–65). [Read Full Article](#)

AFRICA: Study Looks at the Feasibility of Xpert Test for TB in Real-Life Clinical Setting in Southern Africa News-Medical.net (10.30.2013)

An article in News-Medical.net reports on a study about the viability of the Xpert MTB/RIF test for diagnosis of TB and multidrug resistance outside a laboratory and conducted by clinical staff with minimal training. The current, century-old TB test involves sputum smear microscopy and chest X-ray that misses 40–60 percent of cases; reports also indicate that 40 percent of individuals who receive positive test results do not return to learn their results or seek treatment. Xpert provides results in two hours for individuals with suspected drug-resistant TB and TB/HIV coinfection, improves time to starting treatment, and increases the number of individuals who begin treatment on the day of testing. The World Health Organization endorsed the Xpert test in 2011. Professor Keertan Dheda of the Department of Medicine, University of Cape Town, and colleagues, investigated the feasibility of the Xpert test, including accuracy, failure rates, operator adherence, and user appraisal, with a nurse conducting the testing after one day of training. They compared the Xpert test to smear microscopy at five healthcare facilities in South Africa, Zimbabwe, Zambia, and Tanzania.

The researchers randomly assigned 758 adults with suspected TB to same-day smear microscopy (182 culture-positive) and 744 to Xpert testing (185 culture-positive). Researchers assessed TB-related illness in culture-positive patients at the beginning of the study and after two months and six months of treatment using scoring systems that also measured quality of life, and TB signs and symptoms. Results show the Xpert diagnosed more culture-confirmed cases of TB (83 percent) compared to microscopy (50 percent), increased same-day rate of treatment initiation, and decreased drop-out rates by half. Findings show that a non-specialist can conduct the test accurately with minimal training. Dheda contended that the Xpert test might not be ideally suited for poor resource settings, but in countries like South Africa with good clinic infrastructure and high rates of drug resistance and patient drop-out, locating Xpert at clinics in TB hotspots might be beneficial. |

The full report, “Feasibility, Accuracy, and Clinical Effect of Point-of-Care Xpert MTB/RIF Testing for Tuberculosis in Primary-Care Settings in Africa: A Multicentre, Randomised, Controlled Trial,” was published online in the journal *The Lancet* (2013; doi:10.1016/S0140-6736(13)62073-5). [Read Full Article](#)

FROM THE STOP TB PARTNERSHIP:

The Global Laboratory Initiative (GLI) Working Group of the Stop TB Partnership has published the first edition of [Momentum](#), a quarterly newsletter.

The newsletter highlights GLI partners’ achievements, provides updates on global projects and showcases new resources and tools being developed by GLI. The first edition features a story on the fifth GLI partners meeting convened in Annecy, France earlier this year and highlights a new GLI resource: *TB Microscopy Network Accreditation: An assessment tool*. Please contact the GLI secretariat, hosted by the World Health Organization’s Global TB Programme if you would like to be included on the GLI mailing list: gli_secretariat@who.int Read the newsletter at: http://www.stoptb.org/wg/gli/assets/documents/Momentum_Issue%201-2013.pdf More information is available on the GLI at <http://www.stoptb.org/wg/gli/>

FROM THE FIND TB RESOURCES NEWSLETTER:

Highlight of the Month

This month's highlight is [Treating LTBI in Special Situations](#) from the Southeastern National TB Center (SNTC). This self-paced online course consists of interactive case-based modules that provide an approach to treating latent TB infection in several special populations. These include contacts to drug-resistant TB, individuals with hepatitis, individuals with HIV/AIDS, infants and children, pregnant women, individuals with renal failure, individuals due to begin treatment with TNF-antagonists, and transplant candidates and recipients. The course also includes 5 reference books that provide additional information to participants.

[The Affordable Care Act and Tuberculosis Control: Navigating New Territory](#), from the Curry International TB Center.

FROM TAG:

TAG Launches Three-Video Series on TB During the 44th Union World Conference on Lung Health in Paris, TAG launched a three-video series, produced by filmmaker Jonathan Smith and titled *Tuberculosis: Behind the Numbers*, on PLOS Medicine's Community Blog, *Speaking of Medicine*.
<http://www.treatmentactiongroup.org/tb/resources> .

1) Mike Frick and Audrey Zhang discuss the need to modernize directly observed therapy and move toward patient-centered care for both drug-sensitive and drug-resistant TB patients, highlighted in the video, [A Walk to Work with Dr. Vivian Cox](#).

2) Lindsay McKenna and Colleen Daniels describe the importance of access to timely diagnosis and appropriate treatment for patients with drug-resistant TB, and demand that urgency be returned to the global response, underscored in the video, [Drs. Dalene and Arne von Delft](#).

3) The third and final video, *Breaking the Record with Dr. Bart Williams*, illustrates the story of a South African doctor and his experience completing treatment for drug-sensitive TB.

JOURNAL ARTICLES

(October 17 – November 7, 2013)

AIDS. 2013 Oct 23;27(16)

[Paradoxical tuberculosis-associated immune reconstitution inflammatory syndrome after early initiation of antiretroviral therapy in a randomized clinical trial.](#) Laureillard D, Marcy O, Madec Y, Chea S, Chan S, Borand L, Fernandez M, Prak N, Kim C, Dim B, Nerrienet E, Sok T, Delfraissy JF, Goldfeld AE, Blanc FX; CAMELIA (ANRS 1295 – CIPRA KH001) Study Team.

[Rifampin monoresistant tuberculosis and HIV comorbidity in California, 1993-2008: a retrospective cohort study.](#) Prach LM, Pascopella L, Barry PM, Flood J, Porco TC, Hopewell PC, Metcalfe JZ.

Am J Epidemiol. 2013 Oct 15;178(8):1281-8. doi: 10.1093/aje/kwt114. Epub 2013 Jul 23.

[Contribution of Seasonality in Transmission of Mycobacterium tuberculosis to Seasonality in Tuberculosis Disease: A Simulation Study.](#) Soetens LC, Boshuizen HC, Korthals Altes H.

Am J Epidemiol. 2013. Oct 18. [Epub ahead of print]

Estimated Rate of Reactivation of Latent Tuberculosis Infection in the United States, Overall and by Population Subgroup . SHEA KM, Kammerer JS, Winston CA, Navin TR, et al.

PubMed: www.amedeo.com/p2.php?id=24142915&s=tb&pm=2

Am J Respir Crit Care Med . 2013 Oct 15;188(8)

[Update in tuberculosis and nontuberculous mycobacterial disease 2012.](#)*Menzies D, Nahid P.*

[Challenges with QuantiFERON-TB Gold Assay for Large-Scale, Routine Screening of U.S. Healthcare Workers.](#)*Slater ML, Welland G, Pai M, Parsonnet J, Banaei N.*

Am J Trop Med Hyg . 2013 Oct 28. [Epub ahead of print]

[Intestinal Parasite Co-infection among Pulmonary Tuberculosis Cases without Human Immunodeficiency Virus Infection in a Rural County in China.](#)*Li XX, Chen JX, Wang LX, Tian LG, Zhang YP, Dong SP, Hu XG, Liu J, Wang FF, Wang Y, Yin XM, He LJ, Yan QY, Zhang HW, Xu BL, Zhou XN.*

Am J Trop Med Hyg . 2013 Nov 4. [Epub ahead of print]

[High Prevalence of Rifampin-Monoresistant Tuberculosis: A Retrospective Analysis among Iranian Pulmonary Tuberculosis Patients.](#)*Velayati AA, Farnia P, Mozafari M, Sheikholeslami MF, Karahrudi MA, Tabarsi P, Hoffner S.*

Analyst. 2013 Oct 15;138(22):6774-85. doi: 10.1039/c3an01157g.

[Identification of mycobacteria based on spectroscopic analyses of mycolic acid profiles.](#)*Rivera-Betancourt OE, Karls R, Grosse-Siestrup B, Helms S, Quinn F, Dluhy RA.*

Antimicrob Agents Chemother . 2013 Oct 28. [Epub ahead of print]

[Prevalence and molecular characterization of fluoroquinolone-resistant Mycobacterium tuberculosis isolates in China.](#)*Zhang Z, Lu J, Wang Y, Pang Y, Zhao Y.*

Antimicrob Agents Chemother . 2013 Nov;57(11):5740-2. doi: 10.1128/AAC.01345-13. Epub 2013 Aug

[Plasma concentrations of isoniazid and rifampin are decreased in adult pulmonary tuberculosis patients with diabetes mellitus.](#)*Babalik A, Ulus IH, Bakirci N, Kuyucu T, Arpag H, Dagyildizi L, Capaner E.*

Antivir Ther. 2013 Oct 31. doi: 10.3851/IMP2701. [Epub ahead of print]

[Changes to antiretroviral drug regimens during integrated TB-HIV treatment: results of the SAPiT trial.](#)*Naidoo A, Naidoo K, Yende-Zuma N, Gengiah TN, Padayatchi N, Gray AL, Bamber S, Nair G, Karim SS.*

BMC Health Serv Res . 2013 Oct 25;13(1):439. [Epub ahead of print]

[How well can physicians manage Tuberculosis? A Public-Private sector comparison from Karachi, Pakistan.](#)*Naseer M, Khawaja A, Pethani AS, Aleem S.*

BMC Health Serv Res . 2013 Oct 28;13(1):445. [Epub ahead of print]

[Factors associated to referral of tuberculosis suspects by private practitioners to community health](#)

[centres in Bali Province, Indonesia.](#)Putra IW, Utami NW, Suarjana IK, Duana IM, Astiti CI, Putra I, Probandari A, Tiemersma EW, Wahyuni CU.

BMC Infect Dis . 2013 Oct 17;13(1) [Epub ahead of print]

[Long-term dominance of Mycobacterium tuberculosis Uganda family in peri-urban Kampala-Uganda is not associated with cavitary disease.](#)Wampande EM, Mupere E, Debanne SM, Asiimwe BB, Nsereko M, Mayanja H, Eisenach K, Kaplan G, Boom HW, Sebastien G, Joloba ML.

[Nevirapine versus efavirenz-based antiretroviral therapy regimens in antiretroviral-naive patients with HIV and tuberculosis infections in India: a pilot study.](#)Sinha S, Raghunandan P, Chandrashekhar R, Sharma SK, Kumar S, Dhooria S, Ekka M, Velpandian T, Ranjan S, Ahmad H, Samantaray JC, Venkatesh S, Rewari BB, Khan NH, Pandey RM.

[Utility of the REBA MTB-rifa\(R\) assay for rapid detection of rifampicin resistant Mycobacterium Tuberculosis.](#)Cho E, Shamputa IC, Kwak HK, Lee J, Lee M, Hwang S, Jeon D, Kim CT, Cho S, Via LE, Barry 3rd CE, Lee JS.

BMC Infect Dis . 2013 Oct 31;13(1) [Epub ahead of print]

[Potential association of pulmonary tuberculosis with genetic polymorphisms of toll-like receptor 9 and interferon-gamma in a Chinese population.](#)Yang Y, Li X, Cui W, Guan L, Shen F, Xu J, Zhou F, Li M, Gao C, Jin Q, Liu J, Gao L.

[Meta-analysis to compare the accuracy of GeneXpert, MODS and the WHO 2007 algorithm for diagnosis of smear-negative pulmonary tuberculosis.](#)Walusimbi S, Bwanga F, De Costa A, Haile M, Joloba M, Hoffner S.

BMJ Open . 2013 Oct 24;3(10):e002939. doi: 10.1136/bmjopen-2013-002939.

[Development of a risk assessment tool for contact tracing people after contact with infectious patients while travelling by bus or other public ground transport: a Delphi consensus approach.](#)Mohr O, Hermes J, Schink SB, Askar M, Menucci D, Swaan C, Goetsch U, Monk P, Eckmanns T, Poggensee G, Krause G.

BMC Public Health . 2013 Oct 21;13(1) [Epub ahead of print]

[Risk factors for pulmonary tuberculosis in Croatia: a matched case-control study.](#)Jurcev-Savicevic A, Mulic R, Ban B, Kozul K, Bacun-Ivcek L, Valic J, Popijac-Cesar G, Marinovic-Dunatov S, Gotovac M, Simunovic A.

[Tobacco use patterns in tuberculosis patients with high rates of human immunodeficiency virus co-infection in South Africa.](#)Louwagie GM, Ayo-Yusuf OA.

Br J Cancer . 2013 Oct 15. doi: 10.1038/bjc.2013.538. [Epub ahead of print]

[Urinary tuberculosis is associated with the development of urothelial carcinoma but not renal cell carcinoma: a nationwide cohort study in Taiwan.](#)Lien YC, Wang JY, Lee MC, Shu CC, Chen HY, Hsieh CH,

Lee CH, Lee LN, Chao KM.

Chest . 2013 Oct 17. doi: 10.1378/chest.13-1232. [Epub ahead of print]

[Effect of Isoniazid Therapy for Latent Tuberculosis Infection on QuantiFERON-TB Gold In-tube Responses in Tuberculin Skin Test Positive Adults in a High Tuberculosis Incidence Area: A Controlled Study.](#) Johnson JL, Geldenhuys H, Thiel BA, Toefy A, Suliman S, Pienaar B, Chheng P, Scriba T, Boom WH, Hanekom W, Hatherill M.

Clin Infect Dis. 2013 Oct 23. [Epub ahead of print]

[Preventive Therapy for Child Contacts of Multidrug-Resistant Tuberculosis: A Prospective Cohort Study.](#) Seddon JA, Hesselring AC, Finlayson H, Fielding K, Cox H, Hughes J, Godfrey-Faussett P, Schaaf HS.

Clin Infect Dis . 2013 Oct 28. [Epub ahead of print]

Concordance of resistance profiles in households of patients with multidrug-resistant tuberculosis. PARR JB, Mitnick CD, Atwood SS, Chalco K, et al.

PubMed: www.amedeo.com/p2.php?id=24170196&s=tb&pm=2

Clin Infect Dis . 2013 Oct 30. [Epub ahead of print]

[Changes in the Timing of Antiretroviral Therapy Initiation in HIV-Infected Patients With Tuberculosis in Uganda: A Study of the Diffusion of Evidence Into Practice in the Global Response to HIV/AIDS.](#) Vijayan T, Semitala FC, Matsiko N, Elyanu P, Namusobya J, Havlir DV, Kanya M, Geng EH.

Clin Infect Dis . 2013 Nov;57(10):1473-82. doi: 10.1093/cid/cit488. Epub 2013 Jul 29.

[Challenging issues in tuberculosis in solid organ transplantation.](#) Horne DJ, Narita M, Spitters CL, Parimi S, Dodson S, Limaye AP.

Clin Microbiol Infect . 2013 Nov;19(11)

[Tuberculosis patients hospitalized in the Albert Schweitzer Hospital, Lambaréné, Gabon-a retrospective observational study.](#) Stolp SM, Huson MA, Janssen S, Beyeme JO, Grobusch MP.

[Comparative performance of Thin Layer Agar and Löwenstein-Jensen culture for diagnosis of tuberculosis.](#) Battaglioli T, Rintiswati N, Martin A, Palupi KR, Bernaerts G, Dwihardiani B, Ahmad RA, Matthys F, Mahendradhata Y, Van der Stuyft P.

[Interferon- \$\gamma\$ release assays in the diagnosis of active tuberculosis disease in a low-incident setting: a 5-year review of data.](#) Lavender TW, Barrett A, Magee J, Ong EL.

Clin Respir J. 2013 Oct 17. doi: 10.1111/crj.12065. [Epub ahead of print]

[Prevalence and clinical predictors of drug-resistant tuberculosis in three clinical settings in calabar, nigeria.](#)

Clin Rheumatol . 2013 Oct 30. [Epub ahead of print]

[Tuberculosis infection in primary Sjögren's syndrome: a nationwide population-based study.](#) Chang YS, Liu CJ, Ou SM, Hu YW, Chen TJ, Lee HT, Chang CC, Chou CT.

Curr Infect Dis Rep . 2013 Oct 31. [Epub ahead of print]

[Central Nervous System Immune Reconstitution Inflammatory Syndrome.](#) Bahr N, Boulware DR, Marais S, Scriven J, Wilkinson RJ, Meintjes G.

Curr Opin HIV AIDS . 2013 Nov;8(6):579-85. doi: 10.1097/COH.000000000000009.

[Pipeline of drugs for related diseases: tuberculosis.](#) Dooley KE, Nuermberger EL, Diacon AH.

Diabet Med. 2013 Oct 23. doi: 10.1111/dme.12348. [Epub ahead of print]

['Cough-triggered' tuberculosis screening among adults with diabetes in Tanzania.](#) Mtwangambate G, Kalluvya SE, Kidenya BR, Kabangila R, Downs JA, Smart LR, Fitzgerald DW, Peck RN.

Drug Saf. 2013 Nov;36(11):1087-96. doi: 10.1007/s40264-013-0091-1.

[Adverse Events During Treatment of Drug-Resistant Tuberculosis: A Comparison Between Patients With or Without Human Immunodeficiency Virus Co-infection.](#) Sagwa E, Ruswa N, Musasa JP, Mantel-Teeuwisse AK.

Emerg Med J . 2013 Oct 22. doi: 10.1136/emered-2013-202442. [Epub ahead of print]

[Tuberculosis: a missed opportunity for early diagnosis at the front line?](#) Lad TS, Packe GE.

Eur J Clin Nutr . 2013 Oct 30. doi: 10.1038/ejcn.2013.216. [Epub ahead of print]

[Effect of micronutrient deficiency on QuantiFERON-TB Gold In-Tube test and tuberculin skin test in diagnosis of childhood intrathoracic tuberculosis.](#) Mukherjee A, Saini S, Kabra SK, Gupta N, Singh V, Singh S, Bhatnagar S, Saini D, Grewal HM, Lodha R.

Eur J Clin Microbiol Infect D is . 2013 Nov;32(11):1409-15. Epub 2013 May 10.

[Diagnostic accuracy and effectiveness of the Xpert MTB/RIF assay for the diagnosis of HIV-associated lymph node tuberculosis.](#) Van Rie A, Page-Shipp L, Mellet K, Scott L, Mkhwnazi M, Jong E, Omar T, Beylis N, Stevens W, Sanne I, Menezes CN.

Eur Respir J. 2013. Oct 10. [Epub ahead of print]

Tuberculosis transmission between foreign and native-born in EU/EEA: a systematic review . ANDGREN A, Schepisi MS, Sotgiu G, Huitric E, et al.

PubMed: www.amedeo.com/p2.php?id=24114966&s=tb&pm=2

Eur Respir J . 2013 Nov;42(5):1291-301. doi: 10.1183/09031936.00111812. Epub 2012 Oct 25.

[Assessing spatial heterogeneity of multidrug-resistant tuberculosis in a high-burden country.](#) Jenkins HE, Plesca V, Ciobanu A, Crudu V, Galusca I, Soltan V, Serbulenco A, Zignol M, Dadu A, Dara M, Cohen T.

Int J Clin Pract . 2013 Nov;67(11):1199-209. doi: 10.1111/ijcp.12215. Epub 2013 Jun 10.

[Impact of diabetes mellitus on clinical parameters and treatment outcomes of newly diagnosed pulmonary tuberculosis patients in Thailand.](#) Duangrithi D, Thanachartwet V, Desakorn V, Jitruckthai P, Phojanamongkolkij K, Rienhong S, Chuchottaworn C, Pitisuttithum P.

Int J Infect Dis . 2013 Nov;17(11):e993-9. doi: 10.1016/j.ijid.2013.03.019. Epub 2013 May 22.

[Diagnosis and treatment of tuberculous uveitis in a low endemic setting.](#) Vos AG, Wassenberg MW, de Hoog J, Oosterheert JJ.

International Journal of Mycobacteriology online 30 October 2013

[Screening for tuberculosis in family and household contacts in a rural area in Ethiopia over a 20-month period](#) Jose Manuel Ramos, Deжере Biru, Abraham Tesfamariam, Francisco Reyes, Miguel Górgolas

Int J Pharm . 2013 Oct 15;455(1-2):169-81. doi: 10.1016/j.ijpharm.2013.07.043. Epub 2013 Jul 31.

[Risk based approach for design and optimization of stomach specific delivery of rifampicin.](#) Vora C, Patadia R, Mittal K, Mashru R.

Int J Rheum Dis. 2013 Oct 16. doi: 10.1111/1756-185X.12188. [Epub ahead of print]

[Risk of tuberculosis with anti-tumor necrosis factor- \$\alpha\$ therapy: substantially higher number of patients at risk in Asia.](#) Navarra SV, Tang B, Lu L, Lin HY, Mok CC, Asavatanabodee P, Suwannalai P, Hussein H, Rahman MU.

Int J Tuberc Lung Dis . 2013; Nov;17(11)17

First proficiency testing of second-line anti-tuberculosis drug susceptibility testing in 12 provinces of China . JIANG GL, Chen X, Song Y, Zhao Y, et al.

PubMed: www.amedeo.com/p2.php?id=24125456&s=tb&pm=2

Proficiency of drug susceptibility testing of Mycobacterium tuberculosis against pyrazinamide: the Swedish experience . HOFFNER S, Angeby K, Sturegard E, Jonsson B, et al.

PubMed: www.amedeo.com/p2.php?id=24125455&s=tb&pm=2

Characterisation of Mycobacterium tuberculosis isolates lacking IS6110 in Viet Nam . HUYEN MN, Timersma EW, Kremer K, de Haas P, et al.

PubMed: www.amedeo.com/p2.php?id=24125454&s=tb&pm=2

Contribution of CD14-159C/T polymorphism to tuberculosis susceptibility: a meta-analysis . ZHAO J, Lin G, Zhang WH, Ge M, et al.

PubMed: www.amedeo.com/p2.php?id=24125453&s=tb&pm=2

Similar seasonal peak in clustered and unique extra-pulmonary tuberculosis notifications: winter crowding hypothesis ruled out? TOP R, Boshuizen H, Dekkers A, Korthals Altes H, et al.

PubMed: www.amedeo.com/p2.php?id=24125452&s=tb&pm=2

Comparison of molecular and immunological methods for the rapid diagnosis of smear-negative tuberculosis . JAFARI C, Ernst M, Kalsdorf B, Lange C, et al.

PubMed: www.amedeo.com/p2.php?id=24125451&s=tb&pm=2

Dose-response association between salivary cotinine levels and Mycobacterium tuberculosis infection. SHIN SS, Laniado-Laborin R, Moreno PG, Novotny TE, et al.

PubMed: www.amedeo.com/p2.php?id=24125450&s=tb&pm=2

Comparison of time to positive and colony counting in an early bactericidal activity study of anti-tuberculosis treatment . BARK CM, Gitta P, Ogwang S, Nsereko M, et al.

PubMed: www.amedeo.com/p2.php?id=24125449&s=tb&pm=2

Monitoring changes in anti-tuberculosis treatment: associated factors determined at the time of diagnosis . ALTET MN, Vidal R, Mila C, Rodrigo T, et al.

PubMed: www.amedeo.com/p2.php?id=24125447&s=tb&pm=2

Treatment outcomes of tuberculosis patients in Brazilian prisons: a polytomous regression analysis. RIBEIRO MACEDO L, Reis-Santos B, Riley LW, Maciel EL, et al.

PubMed: www.amedeo.com/p2.php?id=24125446&s=tb&pm=2

Risk factors for death among hospitalised tuberculosis patients in poor urban areas in Manila, The Philippines. SHIMAZAKI T, Marte SD, Saludar NR, Dimaano EM, et al.

PubMed: www.amedeo.com/p2.php?id=24125445&s=tb&pm=2

Tuberculosis among the homeless, United States, 1994-2010. BAMRAH S, Yelk Woodruff RS, Powell K, Ghosh S, et al.

PubMed: www.amedeo.com/p2.php?id=24125444&s=tb&pm=2

Impact of HIV on clinical presentation and outcomes of tuberculosis treatment at primary care level [Short communication]. HENEGAR C, Behets F, Vanden Driessche K, Tabala M, et al.

PubMed: www.amedeo.com/p2.php?id=24125443&s=tb&pm=2

Results of rapid and successful integration of HIV diagnosis and care into tuberculosis services in Benin. FERROUSSIER O, Dlodlo RA, Capo-Chichi D, Boillot F, et al.

PubMed: www.amedeo.com/p2.php?id=24125442&s=tb&pm=2

Integrating HIV testing and care into tuberculosis services in Benin: programmatic aspects [Short communication]. FERROUSSIER O, Dlodlo RA, Capo-Chichi D, Boillot F, et al.

PubMed: www.amedeo.com/p2.php?id=24125441&s=tb&pm=2

Improving tuberculosis screening and isoniazid preventive therapy in an HIV clinic in Addis Ababa, Ethiopia. ZAEH S, Kempker R, Stenehjem E, Blumberg HM, et al.

PubMed: www.amedeo.com/p2.php?id=24125440&s=tb&pm=2

Risk factors for mortality in Malawian children with human immunodeficiency virus and tuberculosis co-infection. BUCK WC, Olson D, Kabue MM, Ahmed S, et al.

PubMed: www.amedeo.com/p2.php?id=24125439&s=tb&pm=2

Role of the QuantiFERON(R)-TB Gold In-Tube test in the diagnosis of intrathoracic childhood tuberculosis . LODHA R, Mukherjee A, Saini D, Saini S, et al.

PubMed: www.amedeo.com/p2.php?id=24125438&s=tb&pm=2

[Changes in vitamin C and oxidative stress status during the treatment of tuberculous meningitis.](#) Miric D, Katanic R, Miric B, Kistic B, Popovic-Katanic N, Nestorovic V.

[Pharmacokinetics and serum concentrations of antimycobacterial drugs in adult Turkish patients.](#) Babalik A, Ulus IH, Bakirci N, Kuyucu T, Arpag H, Dagyildiz L, Carpaner E.

[TIMEBOMB revisited 10 years later: can we sustain progress or are we losing the war? \[Sir John Crofton Memorial Lecture\].](#) Reichman LB.

J Acquir Immune Defic Syndr . 2013 Nov 1;64(3):261-70. doi: 10.1097/QAI.0b013e3182a23e9a

[Temporal association between incident tuberculosis and poor virological outcomes in a South african antiretroviral treatment service.](#) Gupta-Wright A, Wood R, Bekker LG, Lawn SD.

J Clin Microbiol . 2013 Oct 16. [Epub ahead of print]

[Evaluation of agar based medium with sheep sera for drug susceptibility testing of Mycobacterium tuberculosis to isoniazid, rifampicin, ethambutol and streptomycin.](#) Coban AY, Uzun M, Bozdogan B.

[Role of pncA and rpsA Gene Sequencing in Diagnosis of Pyrazinamide Resistance in Mycobacterium tuberculosis Isolates from Southern China.](#) Tan Y, Hu Z, Zhang T, Cai X, Kuang H, Liu Y, Chen J, Yang F,

Zhang K, Tan S, Zhao Y.

[Nitrate reductase assay for rapid detection of isoniazid, rifampicin, ethambutol and streptomycin resistance in *Mycobacterium tuberculosis*: a systematic review and meta-analysis.](#) Coban AY, Deveci A, Sunter AT, Martin A.

J Clin Microbiol . 2013. Oct 23. [Epub ahead of print]

[Significant reduction in the rate of indeterminate results of QuantiFERON-TB Gold In-Tube test by shortening incubation delay.](#) Yun JW, Chung HS, Koh WJ, Chung DR, Kim YJ, Kang ES.

[Pre-multidrug resistant *Mycobacterium tuberculosis* Beijing strain associated to disseminated tuberculosis in a pet dog.](#) Botelho A, Perdigão J, Canto A, Albuquerque T, Leal N, Macedo R, Portugal I, Cunha MV.

J Clin Microbiol. 2013. Oct 30. [Epub ahead of print]

Discordance across several drug susceptibility methods for drug-resistant tuberculosis in a single laboratory . BANU S, Rahman SM, Khan MS, Ferdous SS, et al.

PubMed: www.amedeo.com/p2.php?id=24172155&s=tb&pm=2

Proposal of a Consensus Set of Hypervariable Mycobacterial Interspersed Repetitive-Unit-Variable-Number Tandem-Repeat loci for Subtyping of *Mycobacterium tuberculosis* Beijing Isolates . ALLIX-BEGUEC C, Wahl C, Hanekom M, Nikolayevskyy V, et al.

PubMed: www.amedeo.com/p2.php?id=24172154&s=tb&pm=2

J Clin Microbiol . 2013 Nov;51(11)

[Publisher's Expression of Concern: Geographical Differences Associated with SNPs in Nine Gene Targets among Resistant Clinical Isolates of *Mycobacterium tuberculosis*.](#) American Society for Microbiology.

[Development of a Loop-Mediated Isothermal Amplification Assay Targeting the mpb64 Gene for Diagnosis of Intraocular Tuberculosis.](#) Balne PK, Barik MR, Sharma S, Basu S.

[Comparison of 14 Molecular Assays for Detection of *Mycobacterium tuberculosis* Complex in Bronchoalveolar Lavage Fluid.](#) Akkerman OW, van der Werf TS, de Boer M, de Beer JL, Rahim Z, Rossen JW, van Soolingen D, Kerstjens HA, van der Zanden AG.

[Impact of Blood Volume, Tube Shaking, and Incubation Time on Reproducibility of QuantiFERON-TB Gold In-Tube Assay.](#) Gaur RL, Pai M, Banaei N.

[Tuberculosis-Spoligo-Rifampin-Isoniazid Typing: an All-in-One Assay Technique for Surveillance and Control of Multidrug-Resistant Tuberculosis on Luminex Devices.](#) Gomgnimbou MK, Hernández-Neuta I, Panaiotov S, Bachiyska E, Palomino JC, Martin A, Del Portillo P, Refregier G, Sola C.

[Novel Approach for Improving Sensitivity of Microscopic Detection of Acid-Fast Bacilli \(AFB\) by Use of the ReaSLR Method.](#) Verma S, Dhole TN, Kumar M, Kashyap S.

[Identification of Mycobacterium Species and Mycobacterium tuberculosis Complex Resistance Determinants by Use of PCR-Electrospray Ionization Mass Spectrometry.](#) Simner PJ, Buckwalter SP, Uhl JR, Wengenack NL.

J Coll Physicians Surg Pak . 2013 Nov;23(10):780-3. doi: 11.2013/JCPSP.780783.

[Vitamin d deficiency in patients with tuberculosis.](#) Iftikhar R, Kamran SM, Qadir A, Haider E, Hassan Bin Usman.

J Community Health . 2013 Oct 31. [Epub ahead of print]

[HIV Testing of Tuberculosis Patients by Public and Private Providers in New York City.](#) Klein PW, Harris TG, Leone PA, Pettifor AE.

J Crohns Colitis . 2013 Nov 1;7(10):e486-92. doi: 10.1016/j.crohns.2013.03.004. Epub 2013 Apr 11.

[Tuberculosis in anti-TNF- \$\alpha\$ treated patients remains a problem in countries with an intermediate incidence: analysis of 25 patients matched with a control population.](#) Abreu C, Magro F, Santos-Antunes J, Pilão A, Rodrigues-Pinto E, Bernardes J, Bernardo A, Magina S, Vilas-Boas F, Lopes S, Macedo G, Sarmiento A.

J Infect . 2013 Nov;67(5)

[Incidence and outcomes of paradoxical lymph node enlargement after anti-tuberculosis therapy in non-HIV patients.](#) Park KH, Lee MS, Lee SO, Choi SH, Kim YS, Woo JH, Kim SH.

[Female sex and discontinuation of isoniazid due to adverse effects during the treatment of latent tuberculosis.](#) Pettit AC, Bethel J, Hirsch-Moverman Y, Colson PW, Sterling TR; **Tuberculosis** Epidemiologic Studies Consortium (TBESC).

[Commercial MPT64-based tests for rapid identification of Mycobacterium tuberculosis complex: A meta-analysis.](#) Yin X, Zheng L, Lin L, Hu Y, Zheng F, Hu Y, Wang Q.

[QuantIFERON to diagnose infection by Mycobacterium tuberculosis: Performance in infants and older children.](#) Blandinières A, de Lauzanne A, Guérin-El Hourouj V, Gourgouillon N, See H, Pédrón B, Faye A, Sterkers G.

J Infect Dis . 2013 Oct 16. [Epub ahead of print]

[Statin therapy reduces Mycobacterium tuberculosis infection in human macrophages and in mice by enhancing autophagy and phagosome maturation.](#) Parihar SP, Guler R, Khutlang R, Lang DM, Hurdal R, Mhlhanga MM, Suzuki H, Marais AD, Brombacher F.

[Dependence of Efavirenz- and Rifampicin-Isoniazid-Based Antituberculosis Treatment Drug-Drug](#)

[Interaction on CYP2B6 and NAT2 Genetic Polymorphisms: ANRS 12154 Study in Cambodia.](#) Bertrand J, Verstuyft C, Chou M, Borand L, Chea P, Nay KH, Blanc FX, Mentré F, Taburet AM; the CAMELIA (ANRS 1295-CIPRA KH001) Study Group.

J Infect Dis . 2013 Oct 24. [Epub ahead of print]

[Human gene variants linked to enhanced NLRP3 activity limit intramacrophage growth of Mycobacterium tuberculosis.](#) Eklund D, Welin A, Andersson H, Verma D, Söderkvist P, Stendahl O, Särndahl E, Lerm M.

J Infect Dis . 2013 Oct 31. [Epub ahead of print]

[Distinct T Cell Responses When Bacillus Calmette Guerin is Delayed From Birth to 6 Weeks of Age in Ugandan Infants.](#) Lutwama F, Kagina BM, Wajja A, Waiswa F, Mansoor N, Kirimunda S, Hughes EJ, Kiwanuka N, Joloba ML, Musoke P, Scriba TJ, Mayanja-Kizza H, Day CL, Hanekom WA.

J Infect Dis . 2013 Nov;208(10)

[Greater Preexisting Interferon \$\gamma\$ Responses to Mycobacterial Antigens and Lower Bacillary Load During HIV-Associated Tuberculosis.](#) Lahey T, Czechura T, Crabtree S, Arbeit RD, Matee M, Horsburgh CR, Mackenzie T, Bakari M, Pallangyo K, von Reyn CF.

[Serum drug concentrations predictive of pulmonary tuberculosis outcomes.](#) Pasipanodya JG, McIlleron H, Burger A, Wash PA, Smith P, Gumbo T.

J Public Health Manag Pract . 2013 Oct 21. [Epub ahead of print]

[Use of Death Certificates to Identify Tuberculosis-Related Deaths in Washington State.](#) Gallivan MD, Lofy KH, Goldbaum GM.

J Travel Med . 2013 Nov;20(6):361-7. doi: 10.1111/jtm.12072. Epub 2013 Oct 9.

[Dengue Fever, tuberculosis, human immunodeficiency virus, and hepatitis C virus conversion in a group of long-term development aid workers.](#) Visser JT, Edwards CA.

Med Sci Monit . 2013 Oct 18;19:865-874.

[Knowledge, experiences, and attitudes of medical students in Rome about tuberculosis.](#) Laurenti P, Federico B, Raponi M, Furia G, Ricciardi W, Damiani G.

MMWR Recomm Rep . 2013 Oct 25;62(RR-09):1-12.

[Provisional CDC Guidelines for the Use and Safety Monitoring of Bedaquiline Fumarate \(Sirturo\) for the Treatment of Multidrug-Resistant Tuberculosis.](#) Division of Tuberculosis Elimination, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, CDC.

Pathog Dis . 2013 Nov;69(2):101-13. doi: 10.1111/2049-632X.12060. Epub 2013 Jul 17.

[Co-infection with Mycobacterium tuberculosis and human immunodeficiency virus: an overview and motivation for systems approaches.](#) Deffur A, Mulder NJ, Wilkinson RJ.

Pediatr Infect Dis J . 2013 Nov;32(11):1289-91. doi: 10.1097/INF.0b013e31829e7d81

[Increasing incidence of tuberculosis in tuscan youth, 1997 to 2011.](#) Chiappini E, Bonsignori F, Orlandini E, Sollai S, Venturini E, Galli L, de Martino M.

Pharm Res. 2013 Oct 17. [Epub ahead of print]

[Combining Computational Methods for Hit to Lead Optimization in Mycobacterium Tuberculosis Drug Discovery.](#) Ekins S, Freundlich JS, Hobrath JV, Lucile White E, Reynolds RC.

Qual Health Re s. 2013 Oct 24. [Epub ahead of print]

[Sanitoriums and the Canadian Colonial Legacy: The Untold Experiences of Tuberculosis Treatment.](#) Moffatt J, Mayan M, Long R.

Respir Med . 2013 Oct 3. pii: S0954-6111(13)00381.

Are we missing opportunities to confirm the diagnosis of tuberculosis by microbial culture? AL-NAKEEB Z, Gupta V, Bell C, Woodhead M, et al.

PubMed: www.amedeo.com/p2.php?id=24140285&s=tb&pm=2

Respir Med . 2013 Nov;107(11):1797-802. doi: 10.1016/j.rmed.2013.08.011. Epub 2013 Aug 28.

[Incidence of tuberculosis among anti-tumor necrosis factor users in patients with a previous history of tuberculosis.](#) Jo KW, Hong Y, Jung YJ, Yoo B, Lee CK, Kim YG, Yang SK, Byeon JS, Kim KJ, Ye BD, Lee SD, Kim WS, Kim DS, Shim TS.

Scand J Infect Dis . 2013 Nov;45(11):825-36. doi: 10.3109/00365548.2013.826876. Epub 2013 Sep 17.

[TBscore II: Refining and validating a simple clinical score for treatment monitoring of patients with pulmonary tuberculosis.](#) Rudolf F, Lemvik G, Abate E, Verkuilen J, Schön T, Gomes VF, Eugen-Olsen J, Ostergaard L, Wejse C.

The Lancet Infectious Diseases , Volume 13, Issue 11, November 2013

[Corticosteroids for prevention of tuberculosis mortality](#) Karan Madan, Shyam Sunder Yadav, Naveet Wig, Randeep Guleria

[Nomenclature of drug-resistant tuberculosis](#) Zarir F Udwadia, Rohit A Amale, Kanchan K Ajbani, Camilla S Rodrigues

Thorax . 2013 Nov;68(11)

[Accuracy and impact of Xpert MTB/RIF for the diagnosis of smear-negative or sputum-scarce tuberculosis using bronchoalveolar lavage fluid.](#) Theron G, Peter J, Meldau R, Khalfey H, Gina P,

Matinyena B, Lenders L, Calligaro G, Allwood B, Symons G, Govender U, Setshedi M, Dheda K.

[Tuberculosis during TNF- \$\alpha\$ inhibitor therapy, despite screening.](#) *Hofland RW, Thijsen SF, Verhagen MA, Schenk Y, Bossink AW.*

Trans R Soc Trop Med Hyg . 2013 Nov;107(11):690-8. doi: 10.1093/trstmh/trt090. Epub 2013 Sep 29.

[TB treatment in a chronic complex emergency: treatment outcomes and experiences in Somalia.](#) *Liddle KF, Elema R, Thi SS, Greig J, Venis S.*

Trans R Soc Trop Med Hyg . 2013 Nov 4. [Epub ahead of print]

[Profile and treatment outcomes of elderly patients with tuberculosis in Delhi, India: implications for their management.](#) *Patra S, Lukhmana S, Tayler Smith K, Kannan AT, Satyanarayana S, Enarson DA, Nagar RK, Marcel M, Reid T.*

JOB OPPORTUNITIES

FROM FRIENDS OF THE GLOBAL FIGHT:

Friends of the Global Fight is hiring a Policy Associate, and the job description is attached. Please do kindly share with your networks.

[\[Policy Associate\]](#)

GRANTS

FROM NIH:

Fund Title: Enhancing the Capacity for Biomedical Research on Tuberculosis for HIV-infected Mothers and Children in India (R01)

Fund Category: HIV/AIDS

Description: Grant Amount: NICHD intends to commit a total of \$1,000,000 in FY 2014 to fund two to three awards.

Cohort Research Units have been newly established in India through collaborations between the U.S. and Indian governments, investigators, and institutions in order to develop longitudinal cohorts of TB patients and their contacts (including patients with HIV and TB co-infection) and fundamental research laboratories. This Funding Opportunity Announcement (FOA) invites Research Project Grant (R01) applications from institutions/organizations that propose to include HIV-infected and uninfected children and pregnant women with TB exposure, infection, or disease within these recently established

programs in India. These cohorts are an integral part of an effort to enhance biomedical and clinical research capacity in the field of TB and are designed to form the basis for studies employing state of the art research tools. The NICHD mission encompasses research targeted toward pediatric and maternal health, and NICHD is specifically interested in supporting research related to TB infection, with and without HIV co-infection, in pregnant women and children, which are often neglected populations in TB research. The NICHD invites new and experienced investigators to submit research grant applications in collaboration with existing India Cohort Research Units that will create and/or enhance the ability of these research units to achieve scientific aims specific to HIV-infected and uninfected children and pregnant women with TB. This FOA is intended to stimulate and strengthen efforts to address a complex, under-researched area in order to form a basis for future research and clinical care.

Web Page: grants.nih.gov/grants/guide/rfa-files/RFA-HD-14-025.html

Letter of Intent Date: 11/27/2013

Application Due Date: 12/27/2013 **Project Start Date:** 07/01/2014 **Fund Duration:** Up to 4 years.

Application Process:

Applicants must download the SF424 (R&R) application package associated with this funding opportunity using the “Apply for Grant Electronically” button in this FOA or following the directions provided at Grants.gov.

COURSES/WORKSHOPS

FROM THE RTMCCs

THE SOUTHEAST NATIONAL TB CENTER (SNTC):

[Comprehensive Clinical TB Course](#) Date: 12/9/2013 - 12/12/2013 Time: 8:00 AM - 5:00 PM Eastern

Location: SNTC/Gainesville, FL Format: Clinical course This four-day intensive course will familiarize the clinician with all the aspects of tuberculosis infection, disease and clinical care using an interdisciplinary and interactive approach. The curriculum is provided through lecture, interactive case management sessions. The faculty is selected for their unique skill in encouraging interaction and building rapport with participants. The atmosphere is relaxed with an expectation that a free exchange of questions, comments and information will occur.

Additional information: [Directions and Lodging, Flyer](#)

[Tuberculin Skin Test Train-the-Trainer Course](#) 7 credit(s) Date: 12/13/2013 - 12/13/2013 Time: 8:00 AM - 5:00 PM Eastern Location: SNTC/Gainesville, FL Instructor/speaker: Karen Farrell, BSN, RN

This one-day skill-building course provides the knowledge needed to plan, teach, and evaluate a

Mantoux Tuberculin Skin Test (TST) course. The course content includes skills for planning and conducting a TST training, including adult learning principles and teaching strategies. The curriculum is provided through lecture and participatory activities, including practicum in TST administration and reading and instructional skills demonstration. Each participant must demonstrate proficiency in delivering course content plus administering and reading the TST. Participants will receive feedback from experienced trainers as they practice their skills. Topics include: adult learning principles for instructors, tips and tools to plan and conduct a successful TST training, and TST course curriculum review and demonstration. Additional information: [Agenda](#), [Flyer](#)

THE NEW JERSEY MEDICAL SCHOOL GLOBAL TB INSTITUTE

Upcoming Trainings:

TB Today-Integrating Knowledge with Practice November 14 Sturbridge, MA

The purpose of this training is to strengthen providers' knowledge of tuberculosis. Format will include lectures, discussions and interactive breakout sessions. Please check back for additional information.

[BrochureRegister](#)

Medical Update #2: Pitfalls in the Diagnosis and Management of TB November 20 Web-based

This web-based seminar for physicians and nurses will cover atypical presentations of tuberculosis which may complicate, and at times, delay the diagnosis and medical management of tuberculosis disease. Case examples will be included to illustrate examples of challenges in diagnosis and management of complex TB cases. In addition, speakers will share experiences on how to manage such cases using existing resources.

THE HEARTLAND TB CENTER

Course Schedule [Click Here for Class Information](#)

TST Practicum - January 28, 2014 - Harlingen, TX.

This training targets nurses and other allied health care workers responsible for the administration and interpretation of the tuberculin skin test (TST). Registration opens November 13, 2013. For more information contact samuel.caballero@uthct.edu

THE CURRY INTERNATIONAL TUBERCULOSIS CENTER

THE CURRY INTERNATIONAL TUBERCULOSIS CENTER The Curry International Tuberculosis Center is pleased to announce that our 2014 Training Schedule is now available, please visit:

http://www.currytbcenter.ucsf.edu/training/schedule_2014.cfm .

Tuberculosis Case Management and Contact Investigation Intensive Date: November 12-14, 2013

Location: Oakland, CA

The Curry International TB Center in Oakland is pleased to announce an upcoming tuberculosis (TB) case management and contact investigation training which will be conducted in Oakland on November 12-14, 2013. This 3-day course covers many aspects of TB case management and contact investigation, including current contact investigation guidelines, managing the care of TB patients, promoting adherence to treatment, and more. For a complete training description and application information, please visit: <http://www.currytbcenter.ucsf.edu/training/tbcmcinov13.cfm>

Nurse-to-Nurse Training Date: December 2013 Location: San Francisco, CA

TB/HIV Training (title TBD) February 25, 2014 Los Angeles, CA

Training planned and delivered in collaboration with Charles Drew University, UCLA Pacific AIDS Education and Training Centers and the CA STD/HIV Prevention Training Center.

Tuberculosis Program Managers Intensive April 1-4, 2014 Oakland, CA

Four-day intensive for nurses, physicians, and other health professionals working as tuberculosis program managers.

The Curry International Tuberculosis Center is pleased to announce the availability of the following archived webinar: **Tuberculosis Drug-Induced Liver Injury:**

http://www.currytbcenter.ucsf.edu/training/webarchive/tbdili/arch_tbdili.cfm

This 60-minute webinar was created for public and private clinicians and allied health personnel who work with tuberculosis (TB). It clarified key information that providers need to know when working with patients whose liver function is compromised due to the use of anti-TB medication. The webinar was presented live on October 16, 2013.

Friend us on Facebook: <https://www.facebook.com/CITC.UCSF?ref=ts> Follow us on Twitter: @CITC_TB

FROM NATIONAL JEWISH MEDICAL AND RESEARCH CENTER

The 51st Annual Denver TB Course April 9-12, 2014 Denver, Colorado

The purpose of this course is to present this body of knowledge to general internists, public health workers, infectious diseases and chest specialists, registered nurses, and other health care providers who will be responsible for the management and care of patients with tuberculosis. For more information and to register, please call 800-844-2305 or visit www.njhealth.org/TBCourseApril 9-12, 2014 [Register online for the April 9-12, 2014 session](#) or call 800.844.2305

FROM THE UNION

The Union's International Management Development Programme 2013 Courses : To register for any of these courses, visit www.union-imdp.org or email imdp@theunion.org to receive more information. Course fee for all courses includes lodging, breakfast, lunch, coffee and tea breaks, and course materials.

MEETINGS & CONFERENCES

Alphabetically listed by sponsoring organization

CONFERENCES

AMERICAN COLLEGE HEALTH ASSOCIATION:

May 27-31, San Antonio, Texas

AMERICAN PUBLIC HEALTH ASSOCIATION (APHA):

2014 - November 15-19

New Orleans, LA (142nd Meeting)

AMERICAN THORACIC SOCIETY (ATS):

May 16-21, San Diego

As the multiple disciplines that make up pulmonary, critical care, and sleep medicine gather for ATS 2014, the International Conference will have a “big tent” atmosphere devoted to the needs of both clinicians and basic science, translational, and clinical researchers. ATS 2014 will feature more than 500 sessions, 800 speakers, and 5000 original abstracts and case reports. Many of the presentations will come from experts in disciplines that intersect with the ATS’s focus on adult and pediatric pulmonary, critical care, and sleep medicine. There will be talks and research presented on infectious diseases, allergy and immunology, thoracic surgery and

ASSOCIATION OF PRACTITIONERS IN INFECTION CONTROL (APIC):

Anaheim, California, June 7-9

ASSOCIATION OF PUBLIC HEALTH LABORATORIES (APHL):

June 1-4, 2014, Little Rock, Arkansas

ASSOCIATION OF STATE AND TERRITORIAL HEALTH OFFICERS (ASTHO):

September 9-11 Albuquerque, New Mexico

ASTHO Policy Summit September 9.

ASTHO Annual Meeting: September 10-11. [Learn More »](#)

COUNCIL OF STATE AND TERRITORIAL EPIDEMIOLOGISTS:

(CSTE) Nashville, Tennessee June 22-26

HEALTH CARE FOR THE HOMELESS CLINICIANS NETWORK:

2014 National Health Care for the Homeless Conference & Policy Symposium, May 28 – 30 New Orleans, Louisiana

NATIONAL ASSOCIATION OF COUNTY AND CITY HEALTH OFFICERS (NACCHO):

July 9-11 Atlanta, Georgia www.nacchoannual.org

RESULTS:

Washington D.C. June

Join World Bank President Jim Yong Kim and advocates from across the U.S. and more than a dozen countries at the 2014 RESULTS/RESULTS Educational Fund International Conference! Our 2014 conference will bring together an amazing array of practical visionaries - including World Bank President Dr. Jim Yong Kim - and you! We are designing this year's conference to be bigger and more powerful than ever so that, together, we can grow our influence and hasten efforts to end poverty and create a more humane and just nation and world. Join us in Washington, DC next June to accelerate action now

UNION:

[45th Union World Conference on Lung Health](#) 28 October - 1 November 2014, Barcelona, Spain

Website : Barcelona.worldlunghealth.org Theme : Community-driven solutions for the next generation

UNION, NORTH AMERICAN REGION:

February 27 – March 1, 2014, Boston, MA

18th Annual Conference of The Union, North America Region Stronger Together: Stopping TB, From Laboratory to Clinic

[Registration Form](#)

[The Union, NAR Conference Brochure](#)

[The Union, NAR Conference Program](#)