A REMINDER: The new “Friends of Stop TB USA” database will soon replace the old Newsletter mailing list. The change will not be abrupt; however you will need to sign up as a Friend of Stop TB USA to assure that you continue to receive the TB Wire and any or all of the other newsletters and email alerts. If you haven’t had a chance to complete the very short survey and sign up as a Friend of Stop TB USA, we ask that you please take a moment and complete it here…

Please feel free to forward the TB Wire to others who may be interested. If the email is too large to send, you can refer others to the Friends of Stop TB USA signup page where they can sign up to receive it (and other Stop TB USA communications) directly. Stop TB USA can be found on Facebook and Twitter! Links to our social media sites are on the header above. As always, suggestions and comments are welcome and appreciated at setkind@stoptbusa.org.

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WASHINGTON UPDATE

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

DOMESTIC TB FUNDING AND LEGISLATIVE UPDATE

The impending fall election is impacting the annual appropriations process, with the result that fiscal year (FY) 2015 spending bills are now stalled in the Senate. In July, Senate Appropriations Committee chair, Sen. Barbara Mikulski (D-MD), pulled the health spending bill, known as the Labor-Health and Human Services bill (Labor-HHS), from full Appropriations Committee action due to disagreements over Republican-backed amendments on funding for the Affordable Care Act (ACA).

The Senate Labor-Health and Human Services Appropriations subcommittee, chaired by Sen. Harkin (D-IA), passed the FY2015 health spending bill, which provides funding for CDC, including the TB program, on June 10. The bill provides flat funding for CDC’s domestic TB program, at $142.6 million, with actual program level at $135 million. For the CDC overall, the bill provides $7.054 billion, an increase of $170.9 million, or about 2.3 percent, from the FY2014 level. It is unclear when the bill will be considered by the full Senate Appropriations Committee and the full Senate.

It is likely that Congress will run out of time before the start of fiscal year 2015 on October 1 and will have to pass temporary spending measures extending current funding into fiscal year 2015.

GLOBAL FUNDING

The House FY2015 Foreign Operations bill proposes to flat-fund USAID’s global tuberculosis program at the FY2014 level of $236 million. The Senate bill proposes a funding cut of $11 million, or just under 5%, to the program, for a proposed FY2015 funding level of $225 million. Although we are disappointed that the Senate proposed a cut to the program, both proposals are considerably better than the President’s FY2015 budget for the program, which is a $45 million, or 19% funding cut, which would reduce the program’s funding down to $191 million.

TB REAUTHORIZATION BILL

Legislation sponsored by Rep. Gene Green (D-TX) to renew the domestic TB program will be introduced within the next few months. The bill will authorize increased funding for the domestic TB program.
Dr. Anne Fanning to receive the CMA's highest honour

The Canadian Medical Association (CMA) has named Dr. Anne Fanning of Edmonton, a leader in the global fight against tuberculosis and other communicable diseases, the recipient of its 2014 Frederic Newton Gisborne Starr Award. "Dr. Fanning has worked tirelessly to promote education and training in the global fight against tuberculosis and other communicable diseases", said Dr. Louis Hugo Francescutti, CMA President. "Her achievements serve as an inspiration to the medical profession in Canada."

"I am greatly honoured to be the recipient of the CMA's F.N.G. Starr Award which has gone to real giants in medicine. My contribution has been a small one to draw attention to tuberculosis, a killer disease globally and one which attacks the most vulnerable," said Dr. Fanning. "If we neglect it wherever it occurs, it will come back to haunt us."

A graduate of the University of Western Ontario medical school, Dr. Fanning did postgraduate training in internal medicine in Montreal and Alberta. After subspecialty training in infectious diseases, in 1972 she joined the University of Alberta's Department of Medicine where she became responsible for the care of tuberculosis patients — a clinical responsibility she held for more than 30 years. She was director of tuberculosis services for Alberta Health (1987–96) and consultant at the Edmonton TB Clinic which she proposed and designed. In 1998 she took a one-year position as medical officer for the World Health Organization's global TB program. When she returned, she became coordinator of International/Global Health with the University of Alberta's Faculty of Medicine and Dentistry, a position she held until 2011. Appointed Professor Emerita in 2005, she continues her work as a consultant and is involved in the Keiskamma Canada Foundation, the Alberta Council for Global Cooperation, and the Global Indigenous STOP TB initiative working group. In 2005 the Alberta Medical Association named her as one of the "100 physicians of the century," adding to her awards for teaching excellence, global health advocacy, and mentoring. Dr. Fanning is a member of the Order of Canada. She will be presented with the Frederic Newton Gisborne Starr Award at a ceremony on Aug. 20 held at the Westin Ottawa during the CMA's 147th annual meeting.

CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC)

Unaccompanied Children : Please see the attached letters [LINKS TO LETTERS below] describing issues related to tuberculosis control efforts for unaccompanied children who come into the care and custody of the Department of Health and Human Services after being apprehended by immigration authorities. If you have questions about TB control for unaccompanied children in your jurisdiction, please contact the
CDC TB Program Consultant in the Field Services and Evaluation Branch, Division of Tuberculosis Elimination who is assigned to your jurisdiction.

an overview of TB control efforts on behalf of unaccompanied immigrant children
notification that the ORR sends to a TB controller when a child with LTBI or TB exposure is discharged into a jurisdiction.

HIGHLIGHTED TB REPORTS/UPDATES

AMERICAN PUBLIC HEALTH ASSOCIATION (APHA)

The Nation’s Health: Funding cuts hurt, but you can help


Public health funding cuts are having real-world effects. Now a new report is documenting stories about the issues Americans are facing because of the cuts. In its new report, “Faces of Austerity: How Budget Cuts Hurt America’s Health,” the Coalition for Health Funding offers first-person accounts of how federal public health budget cuts harm Americans.

For example, Debbie Swanson, an APHA member and nursing and nutrition supervisor at the Grand Forks Public Health Department in Grand Forks, North Dakota, says a 2010 tuberculosis outbreak in Grand Forks took the community by surprise because public health infrastructure had been reduced. With a budget of $6,000 — but needs exceeding $2 million — Swanson’s team had to rely on local assistance and reallocation of funds to protect those at risk and treat people infected with TB.

Read this story in full on The Nation’s Health’s Storify page.

RESULTS

- CDC’s Huff Po oped on TB
- Chicago Tribune piece on global TB funding
  http://pulitzercenter.org/reporting/asia-vietnam-global-tuberculosis-battle

WHO

WHO Global TB Programme News Flash: High-level International WHO Consultation
Eliminating TB Deaths: Time to Step Up the HIV Response

A high level international WHO consultation was held in conjunction with the International AIDS Society’s biennial meeting - AIDS 2014, on 20 July 2014, in Melbourne, Australia. The consultation aimed to catalyze an accelerated response and high level political buy-in for HIV-associated TB to bring about the elimination of TB deaths among people living with HIV. The meeting was attended by some 80 participants who reviewed progress in the global and regional response, assessed the political commitment to the prevention, diagnosis and treatment of HIV-related TB, analysed the gaps and barriers preventing the elimination of TB/HIV deaths and identified opportunities and next steps critical for eliminating HIV deaths from TB. More on this story

Read the Meeting Report

TREATMENT ACTION GROUP (TAG)

New Podcast Discusses Past, Present, and Future Attempts to Measure Pediatric TB

When a recent study in the Lancet revealed that there may be 650,000 annual cases of TB in children, some began to question whether these figures were at odds with the estimate of 530,000 previously made by WHO in 2012. In reality, WHO has been closely involved in much of the recent research that has emerged on the subject. Additionally, more research is expected and needed in order to even further define the pediatric TB landscape. This podcast features some of the leaders in pediatric TB research contextualizing past, present, and future research into the pediatric TB landscape.

The podcast can be accessed using the following link:
http://www.tballiance.org/media/podcasts/PediatricTBBurden%20.mp3

Mathematical modelling study:
http://www.thelancet.com/journals/langlo/article/PIIS2214-109X(14)70245-1/abstract

More info on TB Alliance STEP-TB program:
http://www.tballiance.org/children/response/

STOP TB PARTNERSHIP

In an effort to generate and promote thought, dialogue and policy actions toward developing a rights-based approach to tuberculosis prevention and treatment in India, a conference will be held 5-6 December 2014 at the University of Chicago Center in Delhi, in New Delhi, India (details below). This event is not organized by the Partnership but we thought this might be of interest to you. Please direct any further queries to Brian
OTHER NEWS

GLOBAL

Seals Brought Tuberculosis to the Americas

Scientific American  Aug 21 10:15am

Bacteria found in ancient human skeletons in Peru point to a relatively recent origin of the disease and to its spread by sea -- Read more on ScientificAmerican.com

Giant Rats Trained to Sniff Out Tuberculosis in Africa

National Geographic  Aug 16 05:03am

Already known for detecting land mines, the giant African rodents may be able to sniff out tuberculosis, the world's second most fatal infectious disease.

Study identifies protein that appears to play key role in protecting people infected with tuberculosis

News-Medical-Net  Aug 20 11:24pm

UCLA-led study has identified a protein that appears to play a key role in protecting people infected with Mycobacterium tuberculosis — the bacterium that causes tuberculosis — from developing the active form of the disease.

UNITED KINGDOM

Cases of tuberculosis on the rise in Surrey

Surrey Advertiser  Aug 15 01:45am

Data indicates an increase in the number of people suffering from the bacterial infection tuberculosis in Surrey

PHILIPPINES

ARMM enlists Muslim clerics in anti-TB drive

Manila Bulletin via Yahoo! Philippines News  Aug 07 09:07am

The Department of Health of the Autonomous Region in Muslim Mindanao (DOH-ARMM) sought the help of constituent religious clerics in the drive against tuberculosis
(TB), which it deemed easy to cure yet continuing to remain among health concerns in the region. Islamic clerics prove to be very effective partners in conveying messages to Muslim communities, the DOH-ARMM said. The agency launched ...

**CANADA**

**Three students in Sask. diagnosed with TB**

Regina Leader-Post   Aug 14 05:40pm

Hundreds of members of four schools in southern Saskatchewan are being encouraged to get testing for tuberculosis after students were diagnosed with the infection this summer. Tuberculosis Prevention and Control Saskatchewan is currently investigating three cases of active tuberculosis. One student went to St. Augustine Community School in Regina, one to Central Collegiate Institute in Moose Jaw ...

**Alberta sees increase in cases of drug-resistant tuberculosis, report finds**

Calgary Herald   Aug 11 05:38am

Cases of multi-drug resistant tuberculosis are on the rise in Alberta, according to a new surveillance report from the office of the province's chief medical officer of health.

**INDIA**

**'Treating drug resistant TB biggest challenge for India'**

IANS via Yahoo! Maktoob News   Aug 06 02:58am

New Delhi, Aug 6 (IANS) The biggest challenge for India is to treat drug resistant tuberculosis (TB), a health ministry official said Wednesday. "How we treat drug resistant TB is going to be the major challenge for India," Lov Verma, secretary, Department of Health and Family Welfare, said. Echoing this, World Health Organisation (WHO) representative Nata Menabde said: "Drug resistant TB is the ...
respiratory disease in state prisons so far this year.

**ADPH investigating after student diagnosed with active case of TB**

WSFA 12 Montgomery  Aug 14 10:00am

Officials with the Alabama Department of Public Health say they are investigating after an Auburn University student was diagnosed with an active case of pulmonary tuberculosis.

**CALIFORNIA**

“**Number of tuberculosis cases in L.A. County rose slightly last year**”,  Abby Sewell, *Los Angeles Times*,

After years of declining tuberculosis rates, Los Angeles County saw an uptick in cases last year, health officials said Tuesday. County public health director Jonathan Fielding said the number of tuberculosis cases reported annually had declined by 60% over the previous 22 years. But in 2013, the number rose slightly. There were 664 cases reported in 2013, a 7% increase from the year before. He attributed the increase partly to “intensified outreach” to identify cases in the homeless population and said he didn’t anticipate a continued trend of increasing cases that could tax the resources of the county hospital system. The report followed a story by the Los Angeles Daily News about treatment of drug resistant tuberculosis cases at Olive View-UCLA Medical Center. Fielding said drug-resistant cases -- which require much more expensive and lengthy treatment than regular tuberculosis cases -- make up about 1.1% of all cases in the county, with 10 multidrug-resistant cases and one extremely drug resistant case under treatment now. Most of those cases come from outside the country, primarily from Asia, Fielding said. The cost to treat these cases ranges from $134,000 to $430,000, compared with $17,000 for a typical tuberculosis case, and may require as much as two years of treatment and two years of follow-up care. Olive View's tuberculosis unit has the capacity to treat 10 such patients at a time, and frequently has patients waiting to transfer there from other hospitals. But health officials said there was not a shortage of tuberculosis beds countywide.

"Routine tuberculosis cases can be treated in many different hospitals quite effectively," Fielding said. "It's the ones that have special problems ... and are resistant to many of the first- and second-line drugs that need the specialists that are only available at Olive View."

**Lincoln High student diagnosed with tuberculosis**

KUSI News San Diego  Aug 11 04:13pm

SAN DIEGO (CNS) - Someone at Lincoln High School this spring had tuberculosis and might have exposed others, the San Diego County Health and Human Services Agency
announced Monday.

GEORGIA

**Atlanta confronts tuberculosis outbreak in homeless shelters**

Reuters via Yahoo! News  Aug 08 03:18pm

By David Beasley ATLANTA (Reuters) - Three homeless people in Atlanta have died of tuberculosis infections as Georgia public health officials work to contain an outbreak affecting shelters, state authorities said on Friday. The outbreak has infected 47 people, including two volunteers, linked to four shelters in Atlanta's Fulton County, said Nancy Nydam, a spokeswoman for the Georgia Department ...

MISSISSIPPI

**Mississippi State Department of Health Confirms Two Cases of Tuberculosis at Tunica Casinos**

WJTV Jackson  Aug 21 12:21pm

JACKSON, Miss. – The Mississippi State Department of Health (MSDH) is confirming two recent cases of active tuberculosis (TB) at two casinos in Tunica. The two cases are in employees of the casinos, and the MSDH has been working closely with the casinos to identify other individuals who were in close contact with the cases.

NEBRASKA

**Those exposed to student with tuberculosis sought**

Yankton Press & Dakotan  Aug 17 12:57am

NORFOLK, Neb. (AP) — Health officials in northeastern Nebraska are tracking down those who might have been exposed to a Norfolk student diagnosed with tuberculosis.

VIRGINIA

**“31 CNU students to be tested for tuberculosis after exposure”**, Sarah Pawlowski, Daily Press, August 7, 2014

NEWPORT NEWS: Thirty-one Christopher Newport University students will be tested for tuberculosis after they were exposed to the infection on campus, a university spokeswoman confirmed Thursday. The Virginia Peninsula Health District recently notified campus officials that a person who attended the school this year tested positive for TB and is being treated, an alert sent out to students, staff and employees Wednesday night states. The student will not return to campus until the health district...
clears his or her return, according to the alert. The students identified as having exposure “that supports further evaluation” have been notified and provided with a testing letter, it states. The students are required to report the results of the test to the health district before they are able to return to campus for the fall semester. CNU spokeswoman Lori Jacobs confirmed that the university is working with the health district, although she said the district is leading the process.

NEW RESOURCES

- Curry International Tuberculosis Center/UCSF Now Available! Two new radiology online resources

**Tuberculosis Radiology Practice Cases** and **Tuberculosis Radiology Image Library**

Curry International Tuberculosis Center/UCSF is pleased to announce the release of two new online radiology products: *Tuberculosis Radiology Practice Cases* and the *Tuberculosis Radiology Image Library*, produced in collaboration with the Firland Northwest Tuberculosis Center.

**Tuberculosis Radiology Practice Cases:**

- These brief, interactive self-study case studies allow you to practice locating areas of radiographic abnormalities using real-life clinical scenarios. Watch for more cases to be added.

**Tuberculosis Radiology Image Library:**

- An open-access resource library of radiographic images of tuberculosis. Individuals may use these images to gain an appreciation for the broad spectrum of radiographic manifestations of tuberculosis. The images are free to download and share for non-commercial educational purposes. To contribute radiographs and help us grow this site, submit images to the editors at CurryTBcenter@ucsf.edu.

- **New Federal Training Center Collaborative Webpage**

A new [Federal Training Center Collaborative (FTCC) webpage](http://www.federaltrainingcentercollaborative.org) with information on current training events, resources, and links to our federally-funded training and technical assistance centers has been announced. To learn more about who we are and what we offer watch this brief [video](http://www.youtube.com/watch?v=example_video). For more information contact info@nnptc.org
Journal articles August 7 through 20


Getting personal perspectives on individualized treatment duration in multidrug-resistant and extensively drug-resistant tuberculosis. Heyckendorf J, Olaru ID, Ruhwald M, Lange C.


Impact of lopinavir/ritonavir or nevirapine on bedaquiline exposures: potential implications for patients with TB/HIV co-infection. Svensson EM, Dooley KE, Karlsson MO.

The Pharmacokinetics of Para-Aminosalicylic Acid in HIV-uninfected and HIV Co-Infected Tuberculosis Patients receiving antiretroviral therapy, managed for Multidrug-resistant and Extensively Drug-Resistant Tuberculosis. de Kock L, Sy SK, Rosenkranz B, Diacon AH, Prescott K, Hernandez KR, Yu M, Derendorf H, Donald PR.
Resource utilization pattern and cost of tuberculosis treatment from the provider and patient perspectives in the state of Penang, Malaysia. Atif M, Sulaiman SA, Shafie AA, Asif M, Babar ZU.

Effects of introducing Xpert MTB/RIF test on multi-drug resistant tuberculosis diagnosis in KwaZulu-Natal South Africa. Dlamini-Mvelase NR, Werner L, Phili R, Cele LP, Mlisana KP.

Community knowledge, attitude, and practices towards tuberculosis in Shinile town, Somali regional state, eastern Ethiopia: a cross-sectional study. Tolossa D, Medhin G, Legesse M.

Yield of close contact tracing using two different programmatic approaches from tuberculosis index cases: a retrospective quasi-experimental study. Loredo C, Cailleaux-Cezar M, Efron A, de Mello FC, Conde MB.


PubMed: www.amedeo.com/p2.php?id=25097193&s=tb&pm=2

**Tuberculosis** in SLE patients: rare diagnosis, risky treatment. Ruangnapa K, Disanneewate P, Vachvanichsanong P.


Treatment outcomes of patients with multidrug- and extensive drug-resistant tuberculosis according to drug susceptibility testing to first- and second-line drugs: an individual patient data meta-analysis. BASTOS ML, Hussain H, Weyer K, Garcia-Garcia L, et al.


Significant Clinical Impact of a Rapid Molecular Diagnostic Test (Genotype MTBDRplus Assay) to detect Multidrug-Resistant Tuberculosis. KIPIANI M, Mirtskhulava V, Tukvadze N, Magee M, et al.


Isolated hepatic tuberculosis mimicking liver tumors in a dialysis patient. Hung YM, Huang NC, Wang JS, Wann SR.


Strategic Roles for Health Communication in Combination HIV Prevention and Care Programs. Vermund SH, Van Lith LM, Holtgrave D.


Impact of Isoniazid Preventive Therapy for HIV-Infected Adults in Rio de Janeiro, Brazil: An Epidemiological Model. Dowdy DW, Golub JE, Saraceni V, Moulton LH, Cavalcante SC, Cohn S, Pacheco AG, Chaisson RE, Durovni B.


Resistance to rifampicin: a review. Goldstein BP.


Kinetics of recA and recX induction in drug-susceptible and MDR clinical strains of
**Mycobacterium tuberculosis**, Bhattar P, Chatterjee A, Mistry N.


**Risk of tuberculosis among healthcare workers in an intermediate-burden country: a nationwide population study,** Chu H, Shih CJ, Lee YJ, Kuo SC, Hsu YT, Ou SM, Shih YN, Tarng DC, Li SY, Chen YT, Chen RC.


**Delaying BCG vaccination until 8 weeks of age results in robust BCG-specific T cell responses in HIV-exposed infants,** Toukam Tchakoute C, Hesseling AC, Kidzeru EB, Gamieldien H, Passmore JA, Jones CE, Gray CM, Sodora DL, Jaspan HB.

**J Infect Dis.** 2014 Aug 15;210(4)


**Integrating social contact and environmental data in evaluating tuberculosis transmission in a South african township,** Andrews JR, Morrow C, Walensky RP, Wood R.

**J Infect Dev Ctries.** 2014 Aug 13;8(8)

**Transportation of sputum samples in cetylpyridinium chloride for drug resistance studies from remote areas of Odisha, India,** Das D, Dwibedi B, Kar SK.

**Low rifampicin concentrations in tuberculosis patients with HIV infection,** Gengiah TN, Botha JH, Soowamber D, Naidoo K, Abdool Karim SS.

**Lung.** 2014 Aug 18. [Epub ahead of print]

**Same but Different: Tuberculosis Treatment and Care Among Migrants from Different Countries of Origin in Israel,** Eisenberg JR, Lidji M, Gelfer E, Zehavi N, Grotto I, Mor Z.

**IGRA as a Predictive Factor of Silent Pulmonary Changes in Individuals Following Exposure to Tuberculosis,** Targowski T, Chelsestowska S, Plusa T.

**Nature.** 2014 Aug 20. doi: 10.1038/nature13591. [Epub ahead of print]

**Pre-Columbian mycobacterial genomes reveal seals as a source of New World human**


**Pre-placement screening for tuberculosis in healthcare workers.** Giri P, Basu S, Sargeant T, Rimmer A, Pirzada O, Adisesh A.

**Pediatr Infect Dis J.** 2014 Aug 7. [Epub ahead of print]

**Increased Risk of Mycobacterium tuberculosis Infection in Household Child Contacts Exposed to Passive Tobacco Smoke.** Sridhar S, Karnani N, Connell DW, Millington KA, Dosanjh D, Bakir M, Soysal A, Deeks J, Lalvani A.


**Culture Conversion Rate at 2 Months of Treatment According to Diagnostic Methods among Patients with Culture-Positive Pulmonary Tuberculosis.** Lee HY, Chae KO, Lee CH, Choi SM, Lee J, Park YS, Lee SM, Yoo CG, Kim YW, Han SK, Yim JJ.

**A Potential Protein Adjuvant Derived from Mycobacterium tuberculosis Rv0652 Enhances Dendritic Cells-Based Tumor Immunotherapy.** Lee SJ, Shin SJ, Lee MH, Lee MG, Kang TH, Park WS, Soh BY, Park JH, Shin YK, Kim HW, Yun CH, Jung ID.


**Rapid Detection of Mycobacterium tuberculosis by Recombinase Polymerase Amplification.** Boyle DS, McNerney R, Teng Low H, Leader BT, Pérez-Osorio AC, Meyer
JC, O'Sullivan DM, Brooks DG, Piepenburg O, Forrest MS.


Comparison of Interferon-γ Release Assay to Two Cut-Off Points of Tuberculin Skin Test to Detect Latent Mycobacterium tuberculosis Infection in Primary Health Care Workers. de Souza FM, do Prado TN, Pinheiro JD, Peres RL, Lacerda TC, Loureiro RB, Carvalho JA, Fregona G, Dias ES, Cosme LB, Rodrigues RR, Riley LW, Maciel EL.


Impact of hepcidin antimicrobial peptide on iron overload in tuberculosis patients. Javaheri-Kermani M, Farazmandfar T, Ajami A, Yazdani Y.


Contact tracing investigation after professional exposure to tuberculosis in a Swiss hospital using both tuberculin skin test and IGRA. Balmelli C, Zysset F, Pagnamenta A, Francioli P, Lazor-Blanchet C, Zanetti G, Zellweger JP.

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JOB OPPORTUNITIES

Friends of the Global Fight Against AIDS, Tuberculosis and Malaria is recruiting a Deputy Director and a Policy Director.

The Deputy Director will report to the President to help provide leadership, direction, oversight, and coordination of day-to-day operations of the organization. He/she will
work to maintain and foster a broad range of collegial relationships with the staff, U.S. policymakers, global health partners, and colleagues at the Global Fund. She/he will lead Friends’ executive team — including policy, communications and development work. The ideal candidate will have managerial experience and be able to operationalize institutional strategies.

The Policy Director reports directly to the President. The successful candidate will work with the President, Deputy Director and Global Fund representatives to inform and support the organization’s work among U.S. policymakers, partners and opinion leaders, and to identify and address key questions and issues that could affect the work and reputation of the Global Fund. He/she will oversee a staff and contractor(s) to develop policy positions and papers, analyze legislative developments and budgets, and oversee Friends’ and the Global Fund’s events and outreach on Capitol Hill. She/he will work with the Director of Communications to help develop messaging and media pieces, web material and general information on the Global Fund. He/she will develop and oversee Friends’ working relationships with colleagues at the Global Fund, on Capitol Hill, in the Office of the Global AIDS Coordinator (OGAC), among NGO partners in Washington, D.C., and with other key actors as needed.

Attached are the full job descriptions for each position or you can find the job postings on the following link: http://theglobalfight.org/careers/.

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COURSES/WORKSHOPS

FROM THE RTMCCs:

THE SOUTHEAST NATIONAL TB CENTER (SNTC)
http://sntc.medicine.ufl.edu/

Advanced Concepts in Pediatric TB: Latent TB Infection
Date: 9/11/2014 - 9/11/2014 Time: 12:00 PM - 1:00 PM Eastern
Instructor/speaker: Nizar Maraqa, MD
Format: Webinar
In part one of this 8-part series, the Pediatric ID Board Certifying Examination Content related to TB is presented by expert speakers via case-based, interactive live webinars. The series goes beyond basic TB concepts while following the pediatric ID guidelines. This session focuses on latent TB infection.

Comprehensive Clinical TB Course
32.5 credit(s) 32.5 credit(s)
Date: 10/6/2014 - 10/9/2014
Time: 8:00 AM - 5:30 PM Eastern Location: SNTC Cost: No Charge 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.

**Tuberculin Skin Test Train-the-Trainer Course**
7 credit(s) Date: 10/10/2014 - 10/10/2014
Time: 8:00 AM - 5:00 PM Eastern Location: SNCT Instructor/speaker: Ellen R Murray, BSN, RN
Cost: No Charge Format: Lecture/didactic
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.

**THE RUTGERS GLOBAL TUBERCULOSIS INSTITUTE (GTBI)**

Additional information for these and other upcoming trainings that are offered by the NJMS Global Tuberculosis Institute can be found at: [http://globaltb.njms.rutgers.edu/training/trainingcalendar.html](http://globaltb.njms.rutgers.edu/training/trainingcalendar.html)

**TB Intensive Workshop** September 9-12, 2014 – Newark, NJ
Contact Jennifer K. Campbell at jennifer.k.campbell@rutgers.edu

**THE HEARTLAND TB CENTER**

For more details and to check for open courses visit [http://www.heartlandntbc.org/training.asp](http://www.heartlandntbc.org/training.asp)

**The Impact of Substance Abuse and Mental Illness in Developing HIV and TB (An Online Course)**
Contact: jessica.quintero@uthct.edu

**TB Nurse Case Management** September 3, 10, 17, 24 (An Online Course)
Contact: jessica.quintero@uthct.edu

TB Nurse Case Management  Oct 14-16, 2014 San Antonio, TX
Contact: delfina.sanchez@uthct.edu

Tuberculin Skin Test (TST) Practicum  Oct 16, 2014 San Antonio, TX
Contact: delfina.sanchez@uthct.edu

TB Intensive  Nov 11-14, 2014 San Antonio, TX
Contact: jessica.quintero@uthct.edu

THE CURRY INTERNATIONAL TUBERCULOSIS CENTER

THE CURRY INTERNATIONAL TUBERCULOSIS CENTER (CITC). The 2014 Training Schedule is available online, for additional information or to apply for upcoming trainings please visit: http://www.currytbcenter.ucsf.edu/training/schedule_2014.cfm

Sharing the Care: Working Together on LTBI Treatment and Management, September 24, 2014 Webinar. 75-minute presentation followed by a 15-minute Q and A session for physicians and other licensed medical professionals who diagnose and treat latent tuberculosis infection.

Focus on LTBI Pilot, September 30, 2014 Oakland, CA. One-day pilot curriculum for physicians, nurses, communicable disease investigators, and other licensed medical professionals who diagnose and treat infection. http://www.currytbcenter.ucsf.edu/training/ltbip14.cfm

Tuberculosis Clinical Intensive + Focus on LTBI Pilot, September 30-October 3, 2014 Oakland, CA. Four-day intensive for physicians and other licensed medical professionals who manage patients with or at risk for tuberculosis. http://www.currytbcenter.ucsf.edu/training/tbcioct14.cfm

Pediatric Tuberculosis: The Essentials with Dr. Ann Loeffler, October 8, 2014 Webinar. 45-minute presentation followed by a 15-minute Q and A session for public and private clinicians and allied health personnel who work with pediatric tuberculosis.

Staying Safe: Preventing TB Transmission in Health Care Facilities with Dr. Kevin Fennelly, October 20, 2014 Webinar. 30-minute presentation followed by a 15-minute Q and A session for nurses and other health care workers who interact with TB patients or who supervise staff working with TB patients in a health care facility.

Mycobacterium Bovis: Epidemiology, Diagnosis, and Treatment, November 7, 2014 Webinar. 75-minute presentation followed by a 15-minute Q and A session for
physicians, other licensed medical professionals, and public health professionals involved in M. Bovis community prevention strategies and M. Bovis case contact investigations.

**Tuberculosis Case Management and Contact Investigation Intensive** November 18-21, 2014 Oakland, CA. Four-day training for nurses, communicable disease investigators, and medical social workers.

**Requesting an “On-Demand” Webinar for your program in 2015:**
The “On-Demand” Webinar program is an effort to target timely TB in-service training to providers working in TB control programs or in other medical settings where TB or LTBI is diagnosed and treated. Each live webinar will be approximately 30 minutes to 1 hour in length. The topic area and date/time for training will be suggested by the jurisdiction submitting the application and, once approved, the faculty, final date/time, and learning objectives, etc., will be determined by CITC’s Curriculum Advisory Committee. “On-Demand” topics requested on this application should reflect current, specific challenges that the program is facing which can be addressed by an expert(s) in the field during a brief lecture. There will be time for questions and answers at the end of the live webinar. If your jurisdiction is in the western region of the U.S. and interested in suggesting topic areas for your own “On-Demand” Webinar in 2015, please submit an application.

**THE MAYO CLINIC CENTER FOR TUBERCULOSIS (MCCT)**

[Mayo Clinic Center for Tuberculosis - Home](http://centerfortuberculosis.mayo.edu/)

**Tuberculosis Clinical intensive:** September 30 - October 2, 2014 in Ft. Wayne, IN

This two and one-half day intensive course will familiarize the clinician and other health care professionals with all the aspects of tuberculosis infection, disease and clinical care using an interdisciplinary and interactive approach. The curriculum is provided through lecture and 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. REGISTRATION is NOW OPEN! Get more information and register today (live course, no registration fee) on our website at: [http://centerfortuberculosis.mayo.edu/](http://centerfortuberculosis.mayo.edu/)

**Tuberculosis Clinical intensive:** November 19-21, 2014 at Mayo Clinic in Rochester, MN

This three-day intensive course designed to familiarize physicians, nurses, pharmacists and other health care professionals with all aspects of tuberculosis infection, disease and clinical care using an interdisciplinary and interactive approach. Registration and program agenda will be available in October. Additional information is available on our website at: [http://centerfortuberculosis.mayo.edu/](http://centerfortuberculosis.mayo.edu/)
FROM NATIONAL JEWISH MEDICAL AND RESEARCH CENTER

The 51st Annual Denver TB Course October 15-18, 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 The 51st Semi-Annual Denver TB Course - National Jewish Health 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.

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EVENTS, MEETINGS & CONFERENCES

Alphabetically listed by sponsoring organization

7th INTERNATIONAL WORKSHOP ON CLINICAL PHARMACOLOGY OF TUBERCULOSIS DRUGS

September 5, 2014 : Washington, DC
Registration for the 7th International Workshop on Clinical Pharmacology of Tuberculosis Drugs is open! Do not miss this opportunity! ANNOUNCEMENT AND Registration and information: 7th International Workshop on Clinical Pharmacology of TB Drugs

AMERICAN PUBLIC HEALTH ASSOCIATION (APHA)

November 15-19 New Orleans, LA

2014 Annual Meeting registration now open as APHA heads to New Orleans

The theme of the meeting is Healthography: How Where you Live Affects Your Health and Well-being.

AMERICAN THORACIC SOCIETY (ATS)

Save the Dates: May 15-May 20, 2015 Denver, Colorado
The American Thoracic Society will celebrate 110 years of disseminating scientific discoveries and clinical advances during the ATS 2015 International Conference. ATS 2015 will cover all aspects of pulmonary, critical care, and sleep medicine, and its sessions, workshops, and more will highlight new findings that are transforming the practice of medicine.

Researchers and clinicians get the first look at the most exciting research in pulmonary, critical care, and sleep medicine each year at the American Thoracic Society International Conference. You are invited to submit an abstract on your research or a unique case report to be considered for ATS 2015, which will be held May 15 to 20 in beautiful Denver, a mountainous metropolis celebrated for groundbreaking discoveries in respiratory medicine and care. The ATS is now accepting the submission of:

- **Scientific Abstracts**, which can report on basic, translational, and clinical science research; epidemiologic, social, biobehavioral, and psychosocial investigations; or educational and quality improvement projects.

- **Case Reports**, which must describe a single, unique case.

The contribution of nearly 6,000 abstracts and case reports each year is what makes the ATS International Conference the preeminent meeting in respiratory medicine. Submission fees for case reports have been cut in half for ATS 2015. Submission fees for both scientific abstracts and case reports from authors from low-income countries have been reduced to $20. Membership in the ATS is not a prerequisite for submission.

**The submission deadline is 5 p.m. (EST) Nov. 5.** Learn more about submitting scientific abstracts and case reports for ATS 2015.

ASSOCIATION OF STATE AND TERRITORIAL HEALTH OFFICERS (ASTHO)

September 9-11 Albuquerque, New Mexico Learn More »

NATIONAL COUNCIL ON CORRECTIONAL HEALTH CARE (NCCHC)

National Conference on Correctional Health Care, October 20-22, 2014, Pre-conference Seminars October 18-19, Las Vegas


NATIONAL MINORITY AIDS COUNCIL

18th Annual United States Conference on AIDS (USCA) October 2-5, 2014, San Diego, California

PUBLIC HEALTH LAW CONFERENCE
October 16–17, 2014, in Atlanta, Georgia.

The conference will gather public health and legal experts from across the country to examine and discuss today’s critical challenges in public health law. Find more information about the conference and learn how to get the early bird registration rate.

THE UNION

45th UNION WORLD CONFERENCE ON LUNG HEALTH 28 October - 1 November 2014 Barcelona, Spain

Theme: Community-driven solutions for the next generation  Click here to download the Barcelona 2014 Brochure
Website: http://barcelona.worldlunghealth.org
Email: barcelona2014@theunion.org

Registration is now open for the year's most important tuberculosis conference – and the largest lung health conference to focus on the issues as they affect low- and middle-income countries. Delegates from 120 countries will gather in Barcelona, Spain for the 45th Union World Conference on Lung Health on 28 October-1 November 2014. Read more.

NORTH AMERICAN REGION: 19th ANNUAL CONFERENCE  February 26-28, 2015 Vancouver, Canada

Click here to view the conference webpage

Deadline for abstract submission: Monday, October 6, 2014 We welcome the submission of abstracts for poster and oral presentations of research on all aspects of tuberculosis control, including epidemiologic, clinical, basic science, nursing, social, behavioural, psychosocial and educational studies, as well as outcomes of program initiatives. Abstracts must be submitted in accordance with these guidelines.

We are pleased to offer travel grants to selected individuals within the Americas and the Caribbean who would otherwise be unable to attend the 19th Annual Conference of the Union - North America Region without financial assistance. It is highly recommended that you seek additional sources of funding.

Deadline for Travel Grant Award submission: Monday, October 6, 2014

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