"I AM STOPPING TB"

World TB Day highlights collective commitment

This year’s World TB Day (24 March) kicked off a two-year campaign celebrating the lives and stories of people affected by TB: women, men and children who have taken TB treatment; nurses; doctors; researchers; community workers—anyone who has contributed towards the global fight against TB.

Statements from around the world—including messages of support from UN Secretary-General Ban Ki-moon and Brazilian President Luiz Inácio Lula da Silva—highlighted global support for the collective commitment of millions of individuals to stopping TB.

Stop TB partners across the globe held events such as sports days, conferences and rallies on or around 24 March 2008. And the slogan for the 2008-2009 campaign—"I am stopping TB"—was displayed everywhere on banners and posters tailored to local tastes and concerns (see photo gallery and the materials section of the World TB Day 2008 web site).

On World TB Day in New York, the UN Secretary General's Special Envoy to Stop TB, Dr Jorge Sampaio, along with senior representatives from the US Centers for Disease Control and Prevention, the Global Health Council, the Foundation for Innovative New Diagnostics, and Becton, Dickinson and Company participated in a roundtable discussion at Columbia University under the theme of "TB Today: Old Enemy, New Hurdles" (webcast). Later that day, they rang the Closing Bell at the New York Stock Exchange.

In the UK, a new coalition was launched on World TB Day to raise awareness of TB through coordinated media activities and campaigns, and to ensure that fighting TB remains a high political priority for the UK government. The UK Coalition to Stop TB involves high-profile private sector, civil society and public sector organisations.

WHO report shows slowing on progress on TB case detection

In the run-up to World TB Day, the World Health Organization released the Global Tuberculosis Control 2008 report on 17 March. The new data released in the report show a slowdown in the progress on diagnosing people with TB in 2006 compared to the previous five years, mainly attributable to some national programmes being unable to keep up the rapid pace that they had sustained during the previous five years.

"We've entered a new era," said WHO Director-General Dr Margaret Chan at a press conference in Geneva. "To make progress, firstly public programmes must be further strengthened. Secondly, we need to fully tap the potential of other service providers. Enlisting these other providers, working in partnership with national programmes, will markedly increase diagnosis and treatment for people in need."

Dr Chan was joined at the press conference by the UN Secretary-General's Special Envoy to Stop TB Dr Jorge Sampaio, UNAIDS Executive Director Dr Peter Piot, Global Fund Executive Director Dr Michel Kazatchkine, WHO Assistant Director-General Dr Hiro Nakatani, WHO Stop TB Department Director Dr Mario Raviglione, Stop TB Partnership Executive Secretary Dr Marcos Espinal and Dr
Jorge Bermudez, UNITAID’s Executive Secretary.

The report—which is based on data collected from 202 countries and territories—states that there were 9.2 million new cases of TB in 2006, including 700,000 cases among people living with HIV, and 500,000 cases of multi-drug resistant TB (MDR-TB). An estimated 1.5 million people died from TB in 2006. In addition, another 200,000 people with HIV died from HIV-associated TB.

News release on the TB report

Figo, Fabrica and Kempinski Hotels join forces to Stop TB

Famed football star and Stop TB Ambassador Luis Figo marked the countdown to World TB Day on 17 March by raising awareness about TB with a group of London high school students. Afterwards, Figo and these young aspiring athletes played a penalty shoot-out, with the support of the UN Secretary General's Special Envoy to Stop TB and former President of Portugal, Jorge Sampaio. The day also saw the launch of a poster campaign featuring Figo as a celebrity spokesman for World TB Day.

Fabrica, Benetton’s research center on communication, developed the campaign on a pro-bono basis as a partner of the Stop TB Partnership.

Kempinski Hotels are providing their support by distributing the Figo posters in postcard format in each guest room in its hotels worldwide. The postcards include facts and information about tuberculosis, its cures and how the Stop TB campaign aims to eliminate TB. Kids’ Clubs operated directly by participating hotels will also have the Figo Educational Comic Book available for children to read after its launch later this year. At the same time, Kempinski will launch an educational drive for staff in its hotels.

Link to Figo’s campaign

NEWS

New report on the business response to TB

The Global Health Initiative of the World Economic Forum released a report in March entitled Tackling Tuberculosis: The Business Response, which provides an overview of the threat posed by tuberculosis to the private sector and makes recommendations for the private sector in the global context.

The report is based on an analysis of responses to questions on TB in the World Economic Forum’s annual Executive Opinion Survey. This survey forms part of the Forum’s annual Global Competitiveness Report, which is intended to assist business leaders and policy-makers in understanding the drivers of, and impediments to, competitiveness in their countries.

“This report makes a persuasive case for why businesses can gain economically by assessing the risk of TB in their communities, protecting their employees from the disease and ensuring that all employees in whom TB is detected receive prompt and appropriate treatment,” said Dr Marcos Espinal, Executive Secretary of the Stop TB Partnership.

“The report offers an additional and no less compelling rationale for businesses to engage in the fight against TB: doing their part as good citizens. At a time when businesses—from family-run manufacturers to multinational corporations—are acknowledging their social responsibilities, engaging in the fight against TB represents a sound investment in society and its future.”

PDF version of report

Drug-resistant tuberculosis at highest rates ever: WHO report

Multidrug-resistant tuberculosis (MDR-TB) has been recorded at the highest rates ever, according to a report released in February presenting findings from the largest survey to date on the scale of drug resistance in tuberculosis.

The WHO Stop TB Department report, Anti-Tuberculosis Drug Resistance in the World, is based on
information collected between 2002 and 2006 on 90 000 TB patients in 81 countries. It also found that extensively drug-resistant tuberculosis (XDR-TB), a virtually untreatable form of the respiratory disease, has been recorded in 45 countries.

The report also found a link between HIV infection and MDR-TB. Surveys in Latvia and Donetsk, Ukraine found nearly twice the level of MDR-TB among TB patients living with HIV compared with TB patients without HIV.

Based on analysis of the survey data, WHO estimates there are nearly half a million new cases of MDR-TB—about 5% of the total nine million new TB cases—worldwide each year.

**NGO forum held in Berlin**

Representatives of German NGOs, the Kreditanstalt für Wiederaufbau development bank and the Stop TB Partnership met on 17 March in Berlin for a forum entitled "The fight against tuberculosis and HIV/AIDS in Africa".

The NGOs formulated a wish-list of actions and tools that would facilitate joint advocacy, including better recognition on the part of the German government of the importance of integrating TB control into HIV/AIDS programmes, innovative tools for the prevention, diagnosis and therapy of TB, and an increase in the German government's financial commitments to the fight against TB.

The NGO representatives will meet again on 2 June in Berlin to discuss action plans. In the meantime, a specially created mailing list and on-line platform are encouraging ongoing communication and debate.

**New agreements to boost drug availability and affordability**

In February, the Global Drug Facility (GDF) and its procurement agent, GTZ, announced the results of a competitive selection process among pre-qualified first-line drug manufacturers.

Awards have been made to five suppliers. Four of them—Svizera, Cadila, Strides and Lupin—were already serving as GDF suppliers. One new supplier, Macleods, also was selected. This expansion in the supplier pool indicates strong interest and competition among manufacturers, and augurs well for favourable pricing and availability of high quality anti-TB drugs.

GDF and GTZ have also introduced a new pricing system for first-line drugs that provides firmer estimates of total costs. Through consultation and cooperation with its agents, GDF is now able to list prices inclusive of quality assurance and Procurement Agent costs—a move that will aid clients in their budgeting and planning and lead to a more efficient drug procurement process.

**Global Laboratory Initiative to be launched**

In May the Laboratory Strengthening Sub-Group of the Stop TB Partnership's DOTS Expansion Working Group and the Supranational Reference Laboratory Network will launch a new initiative aimed at increasing capacity to diagnose patients with drug-resistant TB: the Global Laboratory Initiative. The group's main missions will be to provide country-specific roadmaps for laboratory strengthening, human resource development strategies and laboratory biosafety; and accreditation of laboratories. The Supranational Reference Laboratory Network will also be expanded, to assist in the scaling up of national reference laboratory networks and to provide important reference functions such as susceptibility testing of second-line TB drugs.

**Global Alliance for TB Drug Development (TB Alliance) appoints new chief executive**

The TB Alliance announced on 5 March the appointment of Dr. Jerome Premmereur as President and Chief Executive Officer.
Dr. Premmereur is the former Vice President of Medical Risk Management and former Vice President of U.S. Medical Affairs, both at sanofi-aventis, and former Senior Vice President of Aventis Global Medical Affairs

COUNTRY NEWS

Stop TB Ambassador Anna Cataldi makes high-level visit to Afghanistan and Pakistan

On 10 April, Stop TB Ambassador Anna Cataldi concluded a 12-day visit to Afghanistan and Pakistan, during which she aimed to spur greater commitment to TB control in both countries.

In Kabul Ms Cataldi presided over a consultative workshop, Voicing for the Unheard—Women & TB. The workshop, an initiative of the Ministry of Public Health and WHO Afghanistan, focused on the high proportion of women among people with TB in the country. In Pakistan she visited a rural health center and met the Honourable Speaker of the National Assembly, Dr. Fehmida Mirza a medical doctor.

Read the whole story

Research from Bangladesh and China presented to UK All-Party Parliamentary Group on TB

On 1 April, UK Members of Parliament from both Houses as well as representatives from the UK Department for International Development (DFID), NGOs, teaching hospitals and the London Health Authority heard about COMDIS, a DFID-funded research programme consortium for communicable disease, vulnerability and risk) and its research.

Drs Xiaolin Wei and A.N. Zafar Ullah addressed the All-Party Parliamentary Group on TB on “Overcoming barriers to treatment and diagnosis of TB in China and Bangladesh”.

Dr Wei presented the research achievements leading to the scale-up of the China TB Deskguide, an operational guideline to assist frontline doctors at county levels in the diagnosis and treatment of TB. The guide, which was developed in Pakistan and adapted for use in Uganda, Swaziland and China, will be part of the China National Policy Guide for national scale-up in July 2008. In total, more than 100 000 TB doctors will be trained, greatly strengthening TB control in China.

Dr A.N. Zafar Ullah presented research relating to public-private partnerships in TB control in Bangladesh, specifically the involvement of private medical practitioners and the garments industry in TB control in Dhaka. Since 2003, the involvement of 120 private medical practitioners led to increased access to treatment and coverage of 2 million people. Case detection has doubled (from 32% to 73%) and treatment outcomes have risen from 84% to 91%. This approach was then scaled up in February 2007 to include two new regions and further additions are planned.

COMDIS operates in Bangladesh, China, Nepal, Pakistan, Ghana, Swaziland and Uganda.

Read the presentations

Stopping TB in Mexico: the power of the community

In the Ocosingo jurisdiction of Chiapas, Mexico, more than 100 community members have partnered with Doctors of the World–USA in a campaign to control TB through education and active case finding. Tuberculosis prevalence in Chiapas is double the national rate, due in large part to the political and cultural isolation of local indigenous groups who have extremely limited access to formal health services and education.

Community health workers, or promotores de salud, serve as an essential link in helping local communities access health care and receive critical health information. They are particularly valuable in raising TB awareness because, as members of the community, they garner more trust than a health or government authority could; they speak indigenous languages and understand local culture.

In 2007, Doctors of the World–USA launched its first promotores training session in Ocosingo, teaching participants how to educate their communities about TB, detect coughs, and collect sputum samples (where appropriate) for evaluation at local laboratories. The promotores now visit each family.
in the community, looking for signs of TB, dispelling myths and stigma, and monitoring treatment and adherence among TB patients to prevent the development of drug-resistant TB.

**Using magic to Stop TB in Tarn Taran (India)**

Tarn Taran district in the state of Punjab in India is magically learning about TB. Many of its 1.2 million people—90% of whom live in rural areas—are being treated to magic shows that raise TB and DOTS awareness. The programme reflects the importance placed by the Indian government on information, education and communication (IEC) activities to control TB.

“The show attracts a large audience,” says District TB Officer Dr Gagandeep Singh Grover. “This method of IEC, which involves role plays as well, makes people aware about TB and helps in its control.”

Magician Ved Parkash visits all of the districts in Punjab state, performing in areas with low levels of education and awareness, such as urban slums. Major hospitals are also targeted in order to reach the large number of passers-by: hospital visitors, hospital staff, people heading for nearby bus stops and railway stations. At each performance, Mr Parkash and a local public health expert such as Dr Grover convey clear messages about TB.

Tarn Taran also held a sensitization workshop for the TB patients, NGOs, health workers and the general public on World TB Day, where all present took the pledge of “I am stopping TB”.

**Partnerships strengthen tuberculosis control among refugees in Egypt**

Egypt's National Tuberculosis Programme (NTP) has developed a successful partnership with Refuge Egypt—the Joint Relief Ministry of All Saints’ Cathedral—to treat tuberculosis among refugees, who are particularly susceptible to the disease.

Many refugees face difficulties in accessing Ministry of Health clinics, but do attend Refuge Egypt’s own health clinics, which diagnose, treat and follow up on tuberculosis patients, as well as trace defaulters and conduct contact tracing. These clinics share data with the NTP, and report cases and outcomes, sending data quarterly to the NTP. The NTP provides Refuge Egypt with laboratories, X-ray services, drugs, and sometimes doctors to assist in reporting and registration, as well as free inpatient medical care at the Egyptian Governmental Chest Hospital for the most serious cases. The partners jointly train Refuge Egypt staff on tuberculosis control and run joint health education programmes.

The programme offers services via two primary care clinics at All Saints' Cathedral in Cairo and a satellite clinic in Arba Wa Nus, a slum area in the outskirts of Cairo with high density of refugees.

**RESEARCH NEWS**

**TB vaccine study shows encouraging preliminary results**

Preliminary results of a tuberculosis vaccine clinical trial are showing a specific form of immune response at higher levels than ever previously seen in a TB vaccine study. Researchers at US-based Aeras Global TB Vaccine Foundation, Dutch biotechnology company Crucell N.V. and the University of Cape Town’s South African Tuberculosis Vaccine Initiative (SATVI) announced the preliminary findings at the TB Vaccines for the World conference held from 9 – 11 April, in Atlanta, Georgia, USA.

The early-stage clinical trial is being conducted by SATVI in Worcester, South Africa among 40 healthy adults already vaccinated with Bacille Calmette-Guérin (BCG) vaccine. Dr. Marcos Espinal, Executive Secretary of the Stop TB Partnership, toured SATVI's primary field site and laboratory facilities in February, meeting with researchers and clinical trial volunteers. The SATVI TB vaccine research site in Worcester is the most advanced tuberculosis vaccine study site in the world.
"The work being conducted by SATVI to develop a new vaccine for tuberculosis is a model for researchers globally," Dr. Espinal said. "Finding a new TB vaccine is critical to ending the tuberculosis pandemic in South Africa and around the world."

Tuberculosis is one of the leading causes of death in adults and children in South Africa, where approximately 80 people die from tuberculosis every day.

SATVI press release

**Breathtaking technology to detect pulmonary TB**

**Menssana Research**, funded by the **US National Institutes of Health** (NIH), has developed a highly sensitive breath test which appears to be sensitive and specific for active pulmonary tuberculosis. The apparent mechanism of the breath test is that it detects volatile organic compounds (VOCs) in the breath that are similar to VOC metabolites of Mycobacterium tuberculosis observed in vitro.

The results of a successful pilot study were published in 2006, and NIH funded a multicenter international validation study in the USA, UK, Mexico, and the Philippines whose initial findings support the results of the pilot study.

The breath test currently requires laboratory-based gas chromatography and mass spectroscopy, and is therefore fairly slow and expensive. Menssana plans to optimize the test by increasing its speed and reducing its cost, and is developing new instruments for a point-of-care breath test that could potentially identify patients with active pulmonary tuberculosis within minutes.

**Australia's Centenary Institute announces expansion**

Australia's largest tuberculosis research group, the **Centenary Institute**, has announced its expansion to include more physical laboratory space, more research staff and two new international collaborations.

The institute is launching a **Wellcome Trust**-funded collaborative project with colleagues in Canberra, Paris and the UK to investigate how modified genes change the immune response to the tuberculosis bacterium and the impact this may have on disease progression, from latent infection to active disease. The group is also working with Viet Nam's National Tuberculosis Control Program and Australia's **Woolcock Institute** to study how to improve TB control in that country.

The Centenary team has also been looking at modified forms of the Bacille Calmette-Guérin (BCG) vaccine and their impact on immunity, with promising results.

Press release

**EVENTS**

**Recent Events**

**UNAIDS Programme Coordinating Board focuses on TB**

The **UNAIDS Programme Coordinating Board** called tuberculosis an urgent threat during its annual meeting, held from 23-25 April in Chiang Mai, Thailand.

As a follow-up to a thematic session focusing on TB/HIV, the UNAIDS governing body called on member states to deliver integrated TB and HIV services that provide adequate TB infection control in HIV care settings. The Board also called on the international community, including governments, to address the resource gap for the prevention and treatment of TB in people living with HIV through its inclusion in the broader development agenda.

Read the decisions, recommendations and conclusions
**Tuberculosis a focus of the United Nations Permanent Forum on Indigenous Issues**

In April the United Nations Permanent Forum on Indigenous Issues convened an expert panel on Global TB Initiatives. The event, “How Do We Empower Our People”, aimed to bring greater attention to the disproportionate impact tuberculosis has on indigenous communities. The panel was organized and sponsored by the Assembly of First Nations and Stop TB Partnership and received additional support from UN Permanent Forum Member Tonya Gonella Frischner, Onondaga Nation.

Beverly Jacobs, President of the Native Women’s Association of Canada, served as moderator; and Chief Lyle Whitefish of the Federation of Saskatchewan Nations gave the opening thanksgiving remarks. Panellists included Dr Marcos Espinal, Executive Secretary, Stop TB Partnership; Dr. Don Enarson, Senior Adviser, International Union Against TB and Lung Disease; and Grand Chief Edward John, Tlástén Nation. As part of a broader health discussion during the Permanent Forum, Health Canada presented data to support the need for strengthening tuberculosis services among indigenous peoples. Dr Espinal also delivered a statement supporting this effort.

As follow up, the Assembly of First Nations has plans to hold an expert meeting on tuberculosis in indigenous populations.

**Advocacy, communication and social mobilization workshop for Eastern Mediterranean region**

A workshop organized in Amman, Jordan from 13–17 April by the Stop TB Partnership Secretariat and the WHO Eastern Mediterranean Regional Office brought together TB control experts, advocacy, communication and social mobilization (ACSM) and Global Fund focal points from 6 countries: Egypt, Iraq, Jordan, Morocco, Pakistan, and Sudan (N). The overall purpose of the workshop was to provide participants with the tools and skills they need to plan, implement, and evaluate ACSM activities to support effective TB control and the implementation of their Global Fund grants. The curriculum used was developed by the Program for Appropriate Technology in Health (PATH). All countries identified bottlenecks to the implementation of their Global Fund grants, and have left with specific action plans, which include seeking technical assistance to move forward with various ACSM components of the grants.

The workshop was the second in a series planned for all WHO regions. The first one was held in Thailand on August, 2007.

[More information](#)

**Upcoming Events**

**HIV-TB Global Leaders’ Forum**

Bold new leadership is needed to galvanize action on the HIV/TB epidemic.

The first HIV-TB Global Leaders’ Forum, to be held on 9 June 2008 at the United Nations in New York, will bring together decision-makers who can accelerate action on fighting the dual epidemic. The meeting, which has been endorsed by the UN Secretary-General Ban Ki-moon, will be held on the eve of the high-level meeting of the General Assembly on HIV/AIDS.

The Forum will bring together heads of state, senior political and UN officials with leaders of civil society, media, technical agencies and the private sector. It is expected that the Forum, will produce a Call for Action to drastically cut the number of deaths associated with HIV-TB co-infection.

[Provisional agenda](#)
[Flyer](#)
2009 Stop TB Partners’ Forum: Host city announced

The Stop TB Partnership Secretariat has announced that the third Partners’ Forum, scheduled for 23–25 March 2009, will take place in Rio de Janeiro, Brazil.

“Brazil is stopping TB. We have a high burden of TB in our country but are striving to get diagnosis and treatment to people who need it. And in March 2009 we will host the third Stop TB Partners’ Forum. Please join us,” said Brazilian President Luiz Inácio Lula da Silva in a statement on World TB Day.

The Forum serves as a vehicle for bringing partners together to renew their commitment and intensify their efforts to reach the targets set out in the Global Plan to Stop TB 2006-2015. Between 800 and 1,000 delegates are expected to attend, including the UN Secretary-General’s Special Envoy to Stop TB, Stop TB Ambassadors and high-level representation from high-burden and donor countries, multilateral organizations, intergovernmental organizations, nongovernmental organizations, affected communities, foundations, corporate sector as well as the research and academic communities.

US premiere of “Chopin and The Nightingale” to benefit TB

“Chopin and The Nightingale”, a dramatic reading with music in six acts for narrator, two sopranos and piano, will premiere in the US at the Marcella Sembrich Opera Museum, Bolton Landing, New York on 25 and 27 July 2008 as a benefit for the Icons of Europe TB Fund.

Opera composer Richard Wargo, curator of the museum and recognized as "a fresh new voice in American opera", will direct the performance—co-produced by Icons of Europe—as a key component of the local Chopin festival.

Chopin suffered from tuberculosis. When Jenny Lind, The Swedish Nightingale, sang for Chopin in 1848-1849, he felt better and called her "my nurse". Jenny Lind also raised funds to fight the disease.

“We believe that great culture captures the imagination and stimulates a global discussion of a societal issue such as the re-emergence of TB in the 21st century”, said Icons of Europe president Jens A. Jorgensen.

PUBLICATIONS

Recent Publications

February 2008

TB Tips in Spanish: La tuberculosis: información y consejos para vencer la enfermedad

This short booklet by Paul Thorn is full of practical advice, suggestions, guidance and information in an easy-to-read format for people with tuberculosis.

EVENTS CALENDAR

May 2008

6-7 May Stop TB Partnership Coordinating Board Cairo Info
19-24 May World Health Assembly Geneva Info

June 2008

9 June HIV-TB Global Leaders’ Forum New York Info
10-12 June UN General Assembly High-Level Meeting on AIDS New York
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<td>3-8 August International AIDS Society Conference</td>
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<td>8-12 September PAHO/AMRO Regional NTP Manager Meeting</td>
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<td>October 2008</td>
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<td>November 2008</td>
<td>17-19 November Global Ministerial Forum on Research for Health</td>
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<td>December 2008</td>
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