

Finding and treating people with TB in

Tanzania

- State of the art diagnostics is brought into poor rural areas to offer the best in TB and HIV care
- Almost 60% increase in TB case notifications in project areas
- First time that Xpert MTB/RIF has been used at a community level on a mobile van



Mbeya - In the Mbeya Region of Tanzania a revolutionary new diagnostic technology is changing the health outlook of rural communities and the health staff that serve them. Since late in 2010, a partnership between the University of Munich and the National Institute for Medical Research, has begun screening hard-to-reach communities for tuberculosis (TB). Patients suffering from the disease who had previously tested negative using conventional, 100 year old procedures are now being identified and receiving treatment. Not only can they now hope to get well, they no longer spread the disease through their families and communities. The mobile van carrying the new technology functions as an HIV testing center and the side of the van doubles as a screen for the community to view films where it is parked in the evenings.

The University of Munich and the National Institute for Medical Research project has resulted in increased case detection in the project areas which include some urban areas and prisons as well.

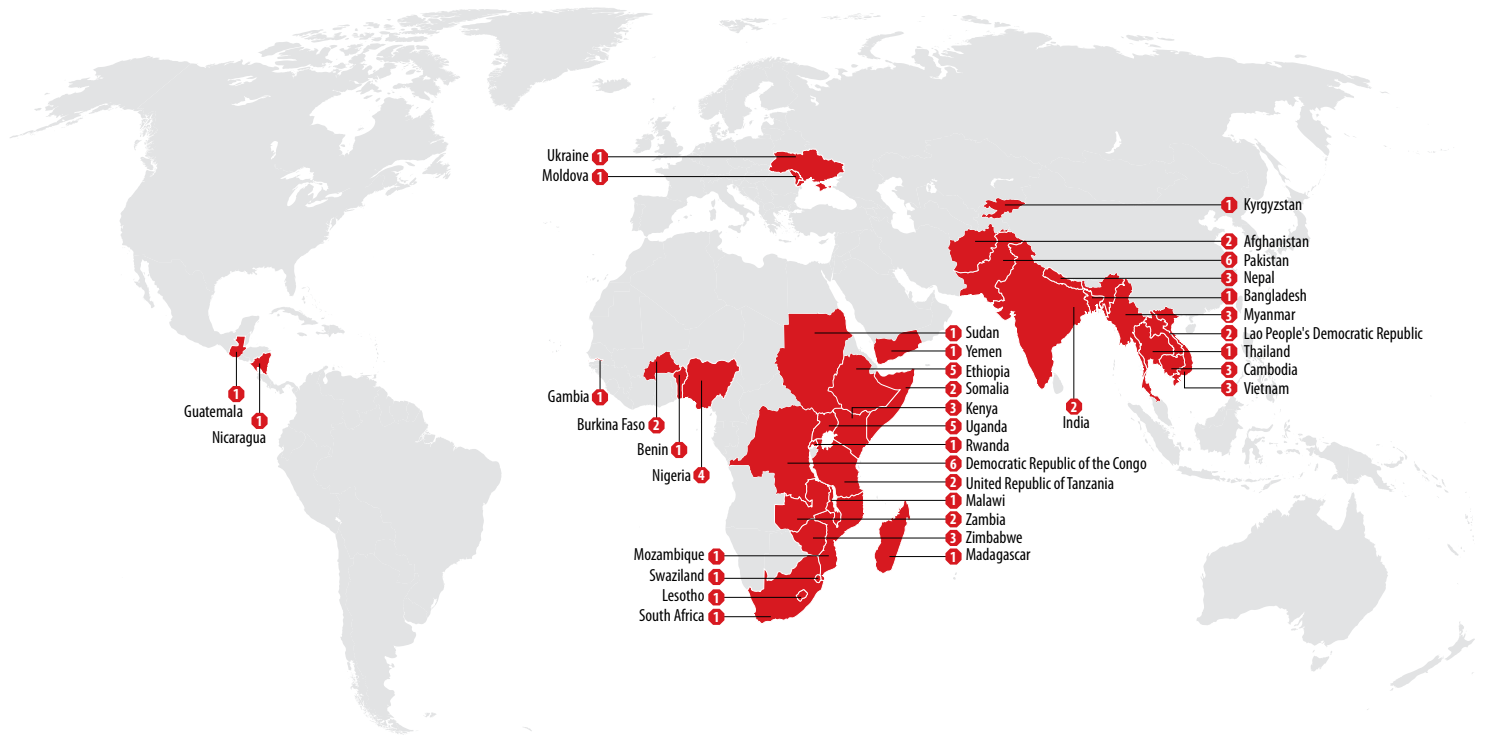
The new diagnostic tool, the Xpert MTB/RIF test, provides a result in less than two hours, as compared to days or even weeks using conventional smear and culture diagnosis, and is bringing state of the art technology to the Mbeya Region. Because the turn-around time for diagnosis is so much shorter than that for conventional screening, patients no longer have to come back several times before they get results, which can prove burdensome for people who are only able to access health facilities with difficulty. They can wait for the results and begin treatment the same day, eliminating the cost of return trips to health facilities which by itself can impede good care for these populations. This new capability, made possible by TB REACH, has improved both the likelihood that people will be willing to go through the process of being tested for TB and the chances of better outcomes, due to earlier treatment.

TB case detection has more than doubled in the project area compared to the previous year and Dr. Petra Clowes, the leader of the initiative in Tanzania noted "This is the first time that this new diagnostic tool has been used at a community level at rural health centers and on a mobile van. It is quite exciting to see the immediate benefits of such amazing technology among populations that previously had such poor access to healthcare."



TB REACH

FINDING AND TREATING PEOPLE WITH TB IN THE WORLD'S POOREST COMMUNITIES



Finding 140,000 new cases means saving 70,000 lives and preventing 1.4 million new infections.

More than **nine million people** around the world become ill with tuberculosis (TB) each year. About one-third of them fail to get an accurate diagnosis or effective treatment and are more likely to die from this curable disease. TB REACH offers a lifeline to people among this missing 3 million by finding and treating people in the poorest, most vulnerable communities in the world. In areas with limited or non-existent TB care, TB REACH supports innovative and effective techniques to find people with TB quickly, avert deaths, stop TB from spreading, and halt the development of drug-resistant strains.

- TB REACH was launched in 2010 and will run until 2016, thanks to a **CAD\$ 120 million** grant from the Canadian International Development Agency.
- TB REACH is committed to getting funds to projects with a very short turnaround time.
- In its first 18 months, TB REACH committed nearly **\$50 million to 75 projects in 36 countries** aiming to find and treat more than **140,000** people with TB who would otherwise have gone undiagnosed.
- Finding 140,000 new cases means saving 70,000 lives and preventing 1.4 million new infections. Scaling up successful TB REACH projects would multiply these figures.

Stop TB Partnership

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