Tuberculosis prevention, care and control
A practical directory of new advances

http://www.stoptb.org/wg.dots_expansion/inat.asp
Driven by NTD demand

• Supports strategic planning efforts of NTP managers, staff and partners
• Practical guidance about what to consider before introducing a new advance
  – Evidence-base
  – Short- and long-term costs
  – Human resource and infrastructure requirements
• Describes 76 new tools and approaches endorsed by WHO since 2000
• Summarizes key evidence and relevant new international standards
Decision-making maps: starting from programmatic challenges

Map 2: Detecting TB cases earlier

As countries continue to improve TB treatment and address gaps in case detection, they simultaneously are looking for ways to detect and treat TB cases more quickly so as to decrease transmission and improve the outcomes of treatment. The map below highlights several advances in this Directory that could (depending on your priorities and context) help detect TB cases more quickly.

Important note Like most challenges faced in TB control, if you begin by assessing and understanding the characteristics of the problem and the behavior of populations at risk, you will be able to shape a more effective response and guide collaboration between partners and stakeholders.

Assess case detection and the behavior of TB suspects to identify strategies that are likely to detect cases more quickly

- Recruit others to help promote and carry out diagnosis
  - Engage public and private providers [68-71]
  - PAL [67]
  - Prisons [58]
  - Employers / workplaces [56]

- Engage community leaders to raise awareness about TB, promote care-seeking behavior and provide patient support [72]

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- Accelerate care-seeking behavior by people with TB symptoms or high risk factors
  - Mobilize stakeholders [75]
  - Incentives and enablers [39]
  - Conduct advocacy and public communication campaigns [74]

- Proactively seek TB cases
  - Implement more active case finding strategies, such as contact tracing [14]
  - Implement TB screening [44]

- Increase the accuracy and speed of diagnosis
  - Address laboratory quality: Standardize lab operating procedures; scale-up routine EQA; seek laboratory accreditation [18-22]
  - Implement two-specimen diagnostic strategy [16]
  - Implement same-day diagnosis by microscopy [17]
  - Develop skills of staff supporting clinical and lab diagnosis, e.g. through training, supervision [4-6]
  - Introduce more sensitive microscopy (LED fluorescence) [28]
  - Implement new policies for DST [50] and tools, e.g. Xpert MTB/RIF assay [23]

Address the needs of risk groups and the poor and vulnerable

- Address TB and poverty [55]
- Prisoners [56]
- Refugees and other displaced populations [58]
### Monitoring, evaluating and measuring the impact of the TB epidemic

<table>
<thead>
<tr>
<th>ID</th>
<th>Area of advance</th>
<th>Year</th>
<th>Description</th>
<th>Approximate costs to implement</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>TB recording and reporting</td>
<td>2006</td>
<td>A standardized recording and reporting (R&amp;R) system that allows assessment of treatment results is an essential component of the Stop TB Strategy. The recommended TB R&amp;R system was revised to align the forms and registers with the Stop TB Strategy and is available for country adaptation (19). Computerized implementations of TB R&amp;R forms, registers and quarterly reports are in use in countries. Some costs are associated with the production and distribution of revised forms or implementation of computerized systems.</td>
<td>Manage / supervise: ●●  Procure / Supply: ●  Staff / Train: ●●</td>
</tr>
<tr>
<td>8</td>
<td></td>
<td>2011</td>
<td>The Routine Data Quality Assessment tool can be used to routinely assess and improve the quality of TB data in R&amp;R systems (20). Doing so requires some training of staff to conduct assessments and analyze their results.</td>
<td>Manage / supervise: ●  Procure / Supply: ●  Staff / Train: ●●</td>
</tr>
<tr>
<td>9</td>
<td>Monitoring and evaluation</td>
<td>2004</td>
<td>New standard TB monitoring and evaluation indicators have been compiled for TB, including guidance on how to define indicators that can be compared over time and between different programs (21).</td>
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## Key to new advances

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<tr>
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<th>Implementing and sustaining this advance makes use of available resources with minor changes to their management and minimal (or no) new costs.</th>
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<tbody>
<tr>
<td>📕</td>
<td>Advance requires careful management attention during implementation, but activities (including supervision) may be incorporated into routine work over time. There are new costs associated with the advance, but they may be reduced by careful procurement and cost-sharing.</td>
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<tr>
<td>📖</td>
<td>Advance places a great demand on management. New supervisory/operational tasks must be sustained over time. This advance may require specialized infrastructure and/or have high immediate and on-going costs.</td>
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</tbody>
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Contents of the Document

• Maps
  – Detecting more TB cases
  – Detecting TB cases earlier
  – Detecting and managing drug-resistant TB
  – Addressing TB/HIV co-infection

• Directory sections
  – Organized by component of the Stop TB Strategy

• References
  – Linked to each new approach or tool defined (n=114)
Next steps

• Hard copies can be ordered

• Document on CDs and downloaded from Stop TB website

• Library of 114 references, with links to documents, to be posted for one-stop search of information
  – Supporting information from partners