



REGIONAL OFFICE FOR Europe



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Европейское региональное бюро



Organisation
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Consolidated Action Plan to Prevent and Combat Multidrug- and Extensively Drug-resistant Tuberculosis in the WHO European Region 2011–2015

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TB/MDR-TB
WHO Regional Office for Europe**



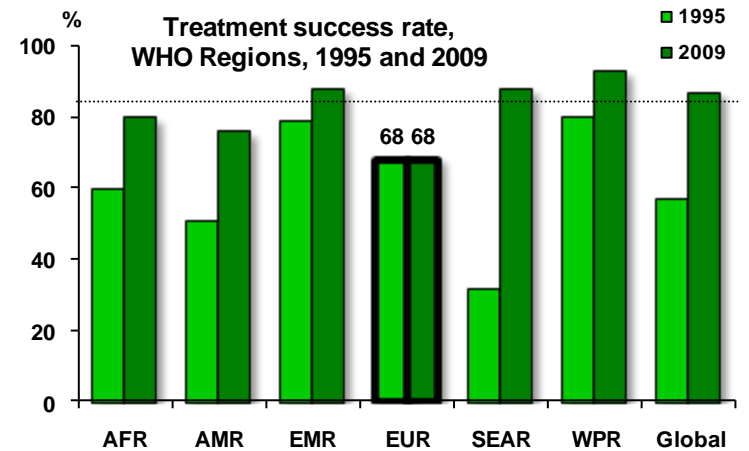
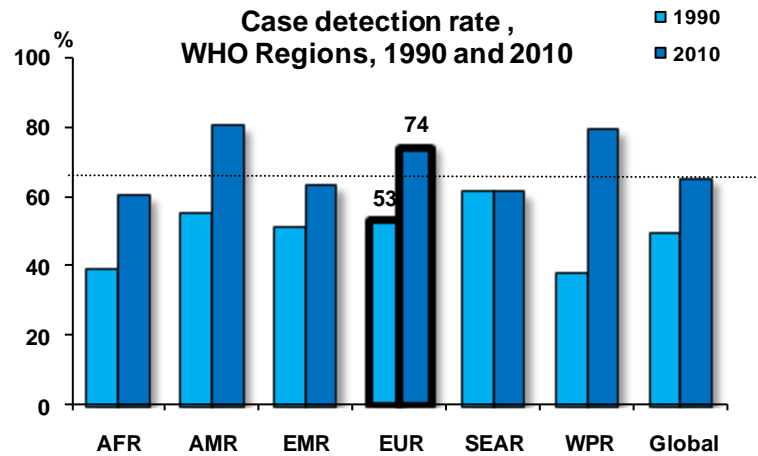
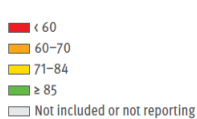
Outline of the presentation

- TB and MDR-TB situation in the WHO European Region
- Key challenges in prevention and control of M/XDR-TB
- The Consolidated Action Plan to Prevent and Combat M/XDR-TB in a nutshell (MAP)
- The WHO Regional Committee for Europe resolution on M/XDR-TB
- TB in children in MAP
- Next Steps

TB burden in the Region

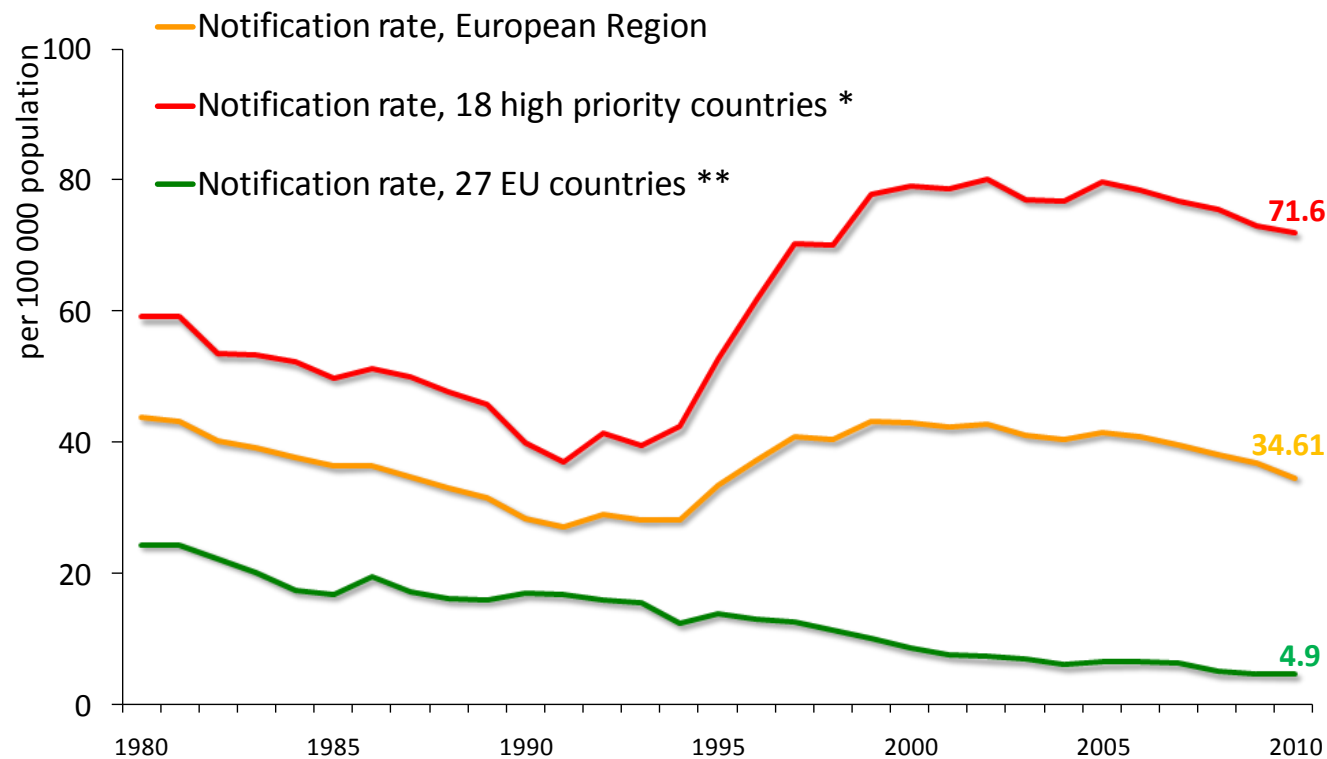
Treatment success rate (TSR) among laboratory-confirmed new pulmonary TB cases, WHO European Region, 2009

TSR (data available on 09.10.2011)



MDG 6c: Tuberculosis

Notification rate; WHO European Region, 1980-2010



* 18 high priority countries

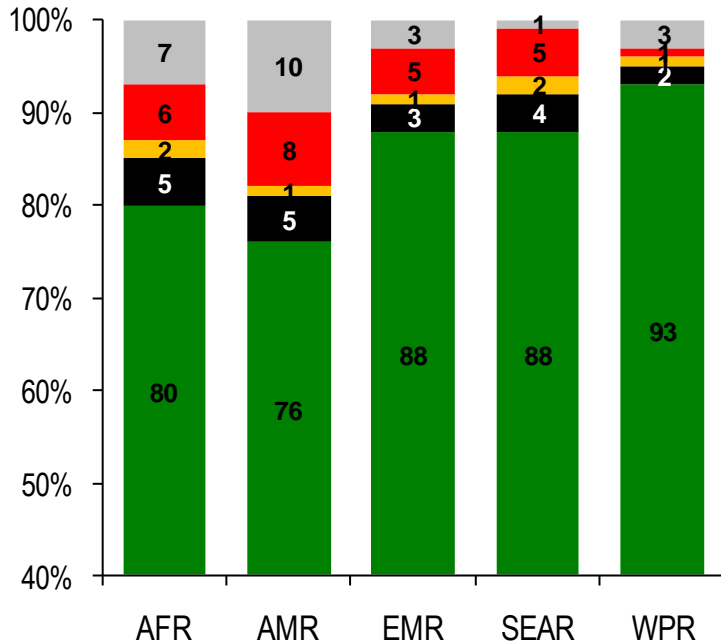
Armenia
Azerbaijan
Belarus
Bulgaria
Estonia
Georgia
Kazakhstan
Kyrgyzstan
Latvia
Lithuania
Moldova
Romania
Russian Fed.
Tajikistan
Turkey
Turkmenistan
Ukraine
Uzbekistan

Note: ** excluding Bulgaria and Romania entering to EU in 2007

Source: Global tuberculosis database, WHO. Accessed on 10 October 2011

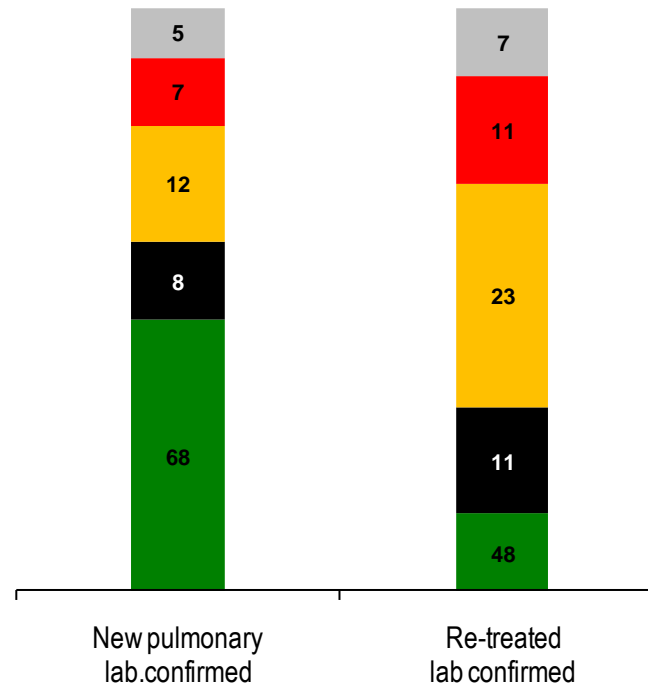
Treatment outcomes of New pulmonary laboratory confirmed in other WHO regions, 2009

Source: the Global TB control 2011 report



Treatment outcomes, European Region 2009 (provisional data)

Source: the Global TB control 2011 report



■ Not evaluated
 ■ Defaulted
 ■ Failed
 ■ Died
 ■ Successfully treated

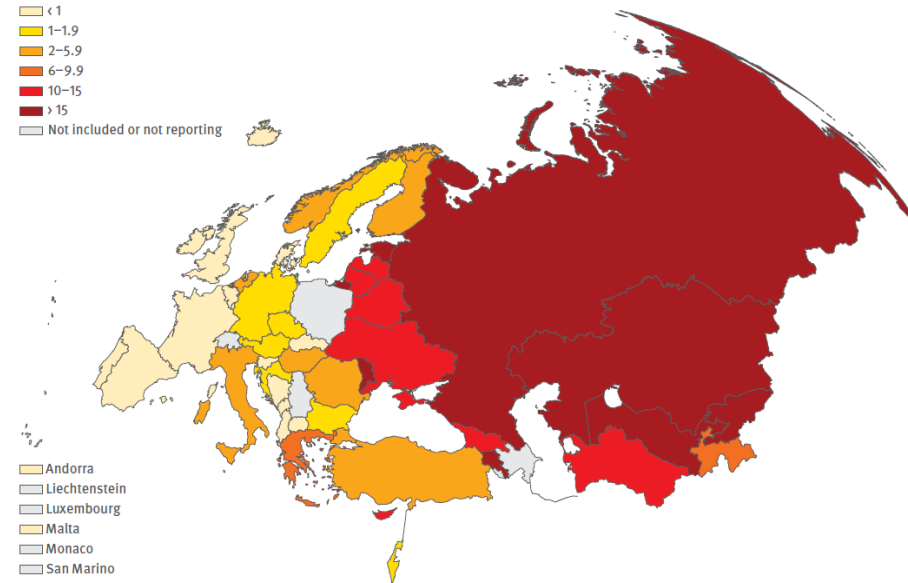
• **The Region has the lowest treatment success rate worldwide:**

- **68%** among new pulmonary TB infectious patients and
- 48% among patients that had been previously treated

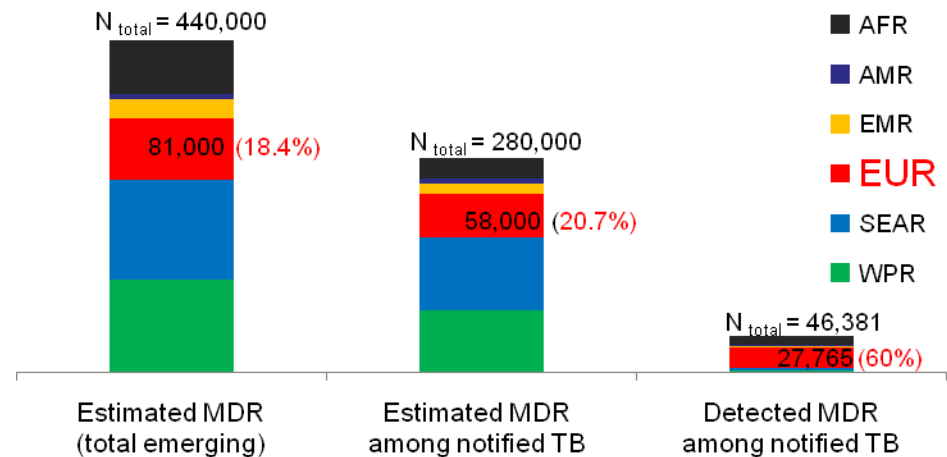
MDR-TB burden, 2009

- 15 out of 27 high-MDR-TB burden countries in the WHO European Region (81 000 patients annually)
- In 2009, only 27 765 MDR-TB patients notified (1/3 of estimates) due to limited access to diagnosis
- Treatment success rate of MDR-TB cohort in the Region 57.4% only

Map 7: Percentage of notified TB cases with primary multidrug resistance, Europe, 2009*



* Data from Kosovo (in accordance with Security Council Resolution 1244 (1999)) is not included in the figures reported for Serbia



Source: M/XDR-TB: 2011 global report (WHO/HTM/TB/2011.3) and TB surveillance in Europe, report 2009

Key challenges in prevention and control of M/XDR-TB

- Health system failure to prevent emergence and spread of drug-resistant TB
 - Late diagnosis of TB and M/XDR-TB
 - Inadequate treatment of TB and subsequent acquired resistance
 - Poor infection control and contact tracing
- Insufficient capacity to treat M/XDR-TB patients
 - Models of care not cost-effective, nor patient friendly
 - Difficult access to expensive second-line drugs
 - Lack of new medicines

Consolidated Action Plan to Prevent and Combat M/XDR-TB

- No business as usual (Special Project of the Regional Director)
- Inclusive approach to develop the Plan
- Building on the existing commitments (from Berlin to Beijing and Baku)
- SMART objectives, clear list of activities
- Full endorsement at 61st Regional Committee in Baku
- Fully costed / includes financial gap analysis
- Follow-up mechanism

Goal and Targets of MAP



Goal

- To contain the spread of drug-resistant TB by achieving **Universal Access** to prevention, diagnosis and treatment of M/XDR-TB in all Member States of the WHO European Region by 2015

Targets

- To decrease by 20 percentage points the proportion of MDR-TB among previously treated patients by end 2015
- To diagnose at least 85% of estimated MDR-TB patients by 2015
- To treat successfully at least 75% of notified MDR-TB patients by 2015

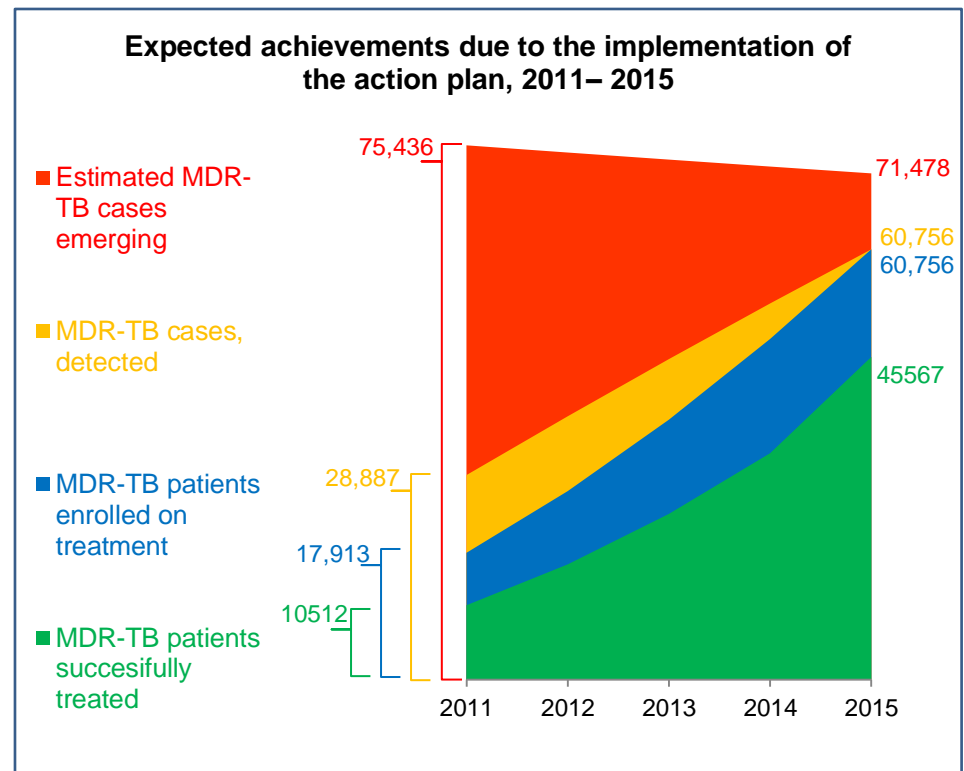
What is new in MAP?

- Prompt diagnosis including newly endorsed molecular diagnostic techniques
- Equitable access to adequate treatment
- Health system approach to MDR-TB prevention and control
- Emphasis on involvement of civil society organizations
- Identifying and addressing social determinants
- Working in partnership, twinning of cities/programmes
- Robust monitoring framework, accountability and follow-up
- Including neglected aspects (e.g. TB in children, palliative care, surgery)



Expected achievements of MAP

- **225 000 MDR-TB patients diagnosed**
- **127 000 MDR-TB patients treated successfully**
- 250 000 MDR-TB cases averted
- 13 000 XDR-TB cases averted
- 120 000 lives and 12 US\$ billion saved



Areas of intervention

1. Prevent the development of M/XDR-TB

- Identify and address social determinants, improve adherence to treatment, improve health financing and involved primary health care services

2. Scale up access to early diagnosis

- Strengthen TB laboratory network, facilitate introduction of new diagnostic technologies, break system barriers to access

3. Scale up access to effective treatment

- Ensure sufficient quantity of quality second line drugs, improve management of adverse reactions and promote production of new drugs

4. Scale up TB infection control

- Assess, plan and improve airborne infection control in health care and congregate settings

Areas of intervention (cont.)

5. Strengthen surveillance

- Electronic recording and reporting, improve quality of data and capacity to use data

6. Expand management capacity of the programmes

- Adapt new policy guidance, improve human resources, foster partnership and coordination, ensure ethics and human rights

7. Address the needs of special populations

- Ensure TB/HIV collaborative activities, specific action for children, prisoners, migrants and hard-to-reach populations

WHO Regional Committee resolution on M/XDR-TB

adopts the Consolidated Action Plan and

Urges Member States

- to harmonize as appropriate their national health strategies and/or TB/MDR-TB response plans based on the Regional Plan
- to identify and address determinants and health system challenges leading to emergence of drug-resistant TB
- to provide universal access to early diagnosis and effective treatment of MDR-TB patients
- to address the needs of special populations
- to closely monitor and evaluate implementation of the actions outlined in the Action Plan

Requests the Regional Director

- to provide leadership, strategic direction and technical support for implementation of the Action Plan
- to facilitate the exchange of experiences and know-how among Member States
- to establish a platform to strengthen partnership for prevention and control of TB and M/XDR-TB
- to assess progress in the prevention and control of M/XDR-TB every other year starting from 2013 and report back to the Regional Committee

Primary Health Care, Psycho-social Support, Health Financing

TB in children and MAP

- **Activity 7.3.1 The Member States will** accelerate the adoption of updated **childhood TB guidelines** by mid-2012.
- **Activity 7.3.3 The Member States will include and prioritize childhood TB** in their national TB strategic or national health plans by the end of 2013.
- WHO/Europe Task Force on TB in children
 - Build a core group of experts with consensus on TB in children
 - Provide the Member States with the technical assistance
 - Improve surveillance
- A Regional training and workshop is planned for the first quarter 2012

Launch of MAP



Next steps

- Comprehensive national MDR-TB response plans in line with MAP in 2012
- Health system audits to identify bottlenecks and propose solutions
- Facilitate diverse models of technical assistance
- High Level visits to ensure commitment to implementation of MAP
- Yearly progress report (WHO/ECDC annual monitoring & surveillance report)
- Interagency steering group involving civil society organizations for follow-up of MAP

Thank you very much for your attention