

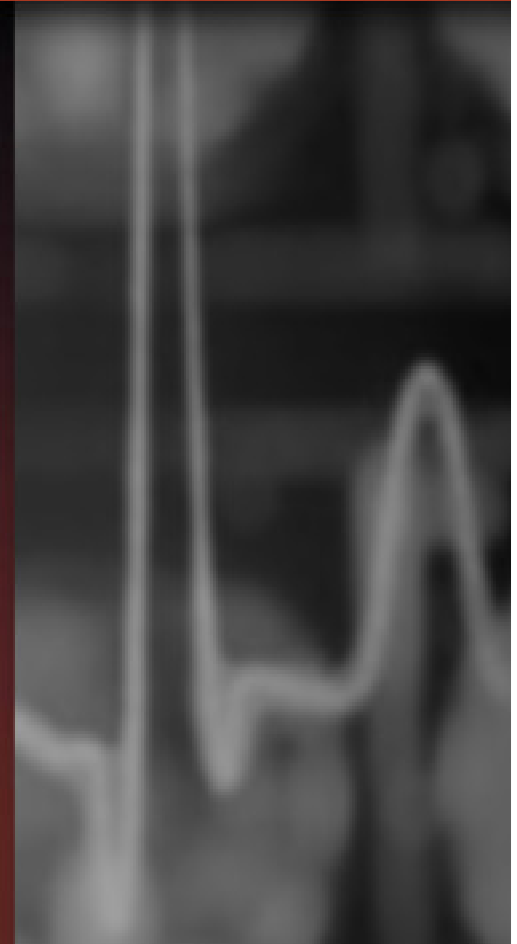
# Problems of MDR-TB in Russia

Vladislav V. Erokhin

Director

Central TB Research Institute Russian  
Academy of Medical Science

Tbilisi, September 2007



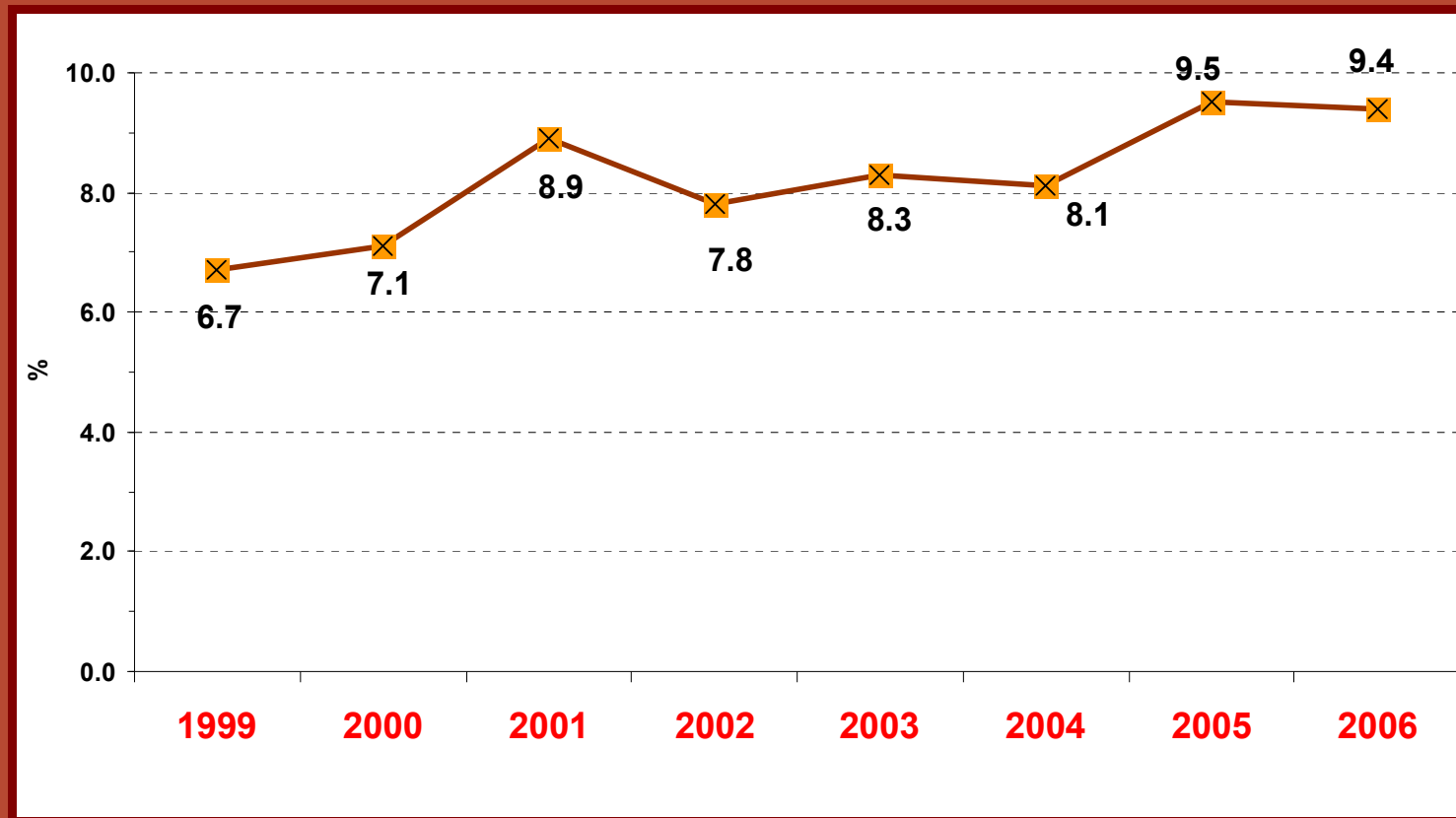


In 2006:

**24055 (20.3%) MDR-TB**  
cases registered in Russia

**4056 (9.4%) MDR-TB cases**  
among new TB patients

# MDR among new pulmonary TB patients with positive smear/culture Russia (Form # 33), %

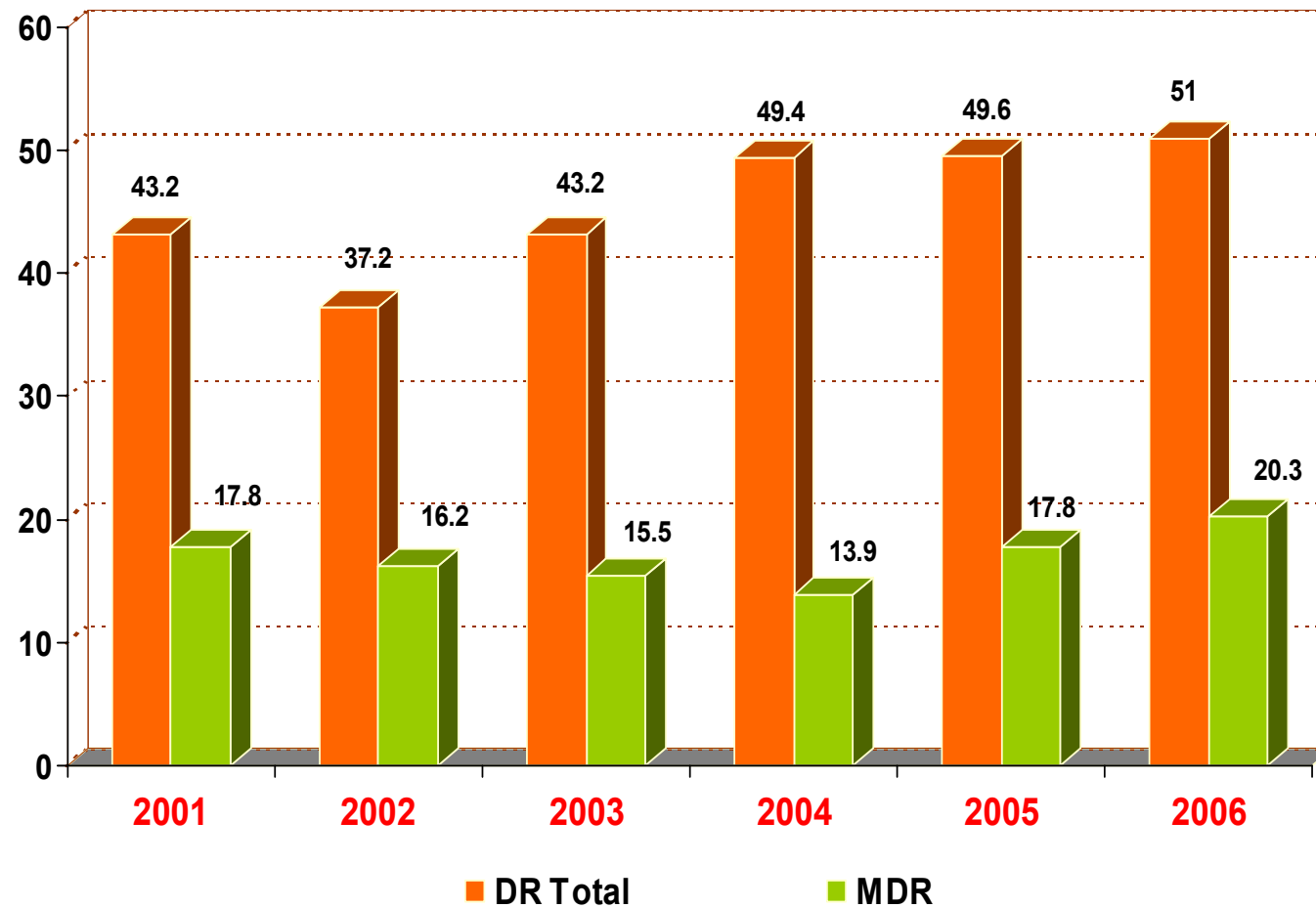



# MDR among previously treated pulmonary TB patients with positive smear/culture Russia (Form # 33), %



# Drug resistance among new TB patients in penitentiary facilities Russia (%)

(data from the Russian Federal Correctional Service)



- 
- **MDR-TB is among major causes of ineffective treatment and the magnitude of the problem tends to increase. The situation is worsened by growing HIV rates**
  - **WB- and GF-supported Projects in Russia will allow for the situation improvement**

## **World Bank (IX-2003) and Global Fund (01.12.2005) Projects:**

- To strengthen Russian bacteriology services
- To treat **7 500** MDR-TB patients with second-line drugs
- To establish **5** centers of excellence in the civilian sector (federal TB research institutes)
- To establish **8** TB control centers in the penitentiary sector

## **Published guidelines and new training modules to facilitate implementation of the Projects:**

- 1. «TB Control at Municipal Level»**
- 2. «Microscopy Testing for TB Detection»**
- 3. «Culture Testing for TB Diagnosis»**
- 4. «Guidelines for the Programmatic Management of Drug-Resistant Tuberculosis» - translated into Russian and published**

# DOTS-Plus projects in Russia

Russian regions	GLC Approval/ Date	No. Patients	Drug Procurement/ Status
1. Orel region	Approved 07/2006	200	Signed contract
2. Arkhangelsk region	Approved 06/2006	200	Delivery
		590	Signed contract
3. Ivanovo region	Approved 11/2005	158	Under discussion
4. Vladimir region	Approved 06/2006	210	Signed contract
5. Republic of Khakassia	Approved 06/2006	324	Signed contract
6. Belgorod region	Approved 11/2006	250	Under discussion
7. Novgorod region	Approved 01/2007	240	Under discussion
8. Republic of Mari-El	Approved 11/2006	204	Under discussion
9. Novosibirsk region	Approved 11/2006	900	Under discussion
10. Samara region	Approved 11/2006	760	Under discussion
11. Rep. of Chuvashia	Approved 11/2006	210	Under discussion
12. Republic of Karelia	Approved 04/2007	300	Under discussion
<b>Total:</b>		<b>4 546</b>	

# Provision of second-line drugs for Russian MDR-TB patients/ GFATM-supported Project

No. regions	Application to GLC/ Status	No. MDR-TB patients to be enrolled
12 regions	Approved	4 546
9 regions	Applied	1 507
10 regions	Ready to apply	1 410
		<b>Total: 7 463</b>

# **Drug procurement mechanism**

**“To help contain resistance to second-line TB drugs and consistent with the policies of other international funding sources, all procurement of medications to treat Multi Drug Resistant TB (MDR-TB) must be conducted through the Green Light Committee (GLC)”.**

**Report of the Third Board Meeting, October 10-11, 2002**

**It means that GF doesn't imply any procurement alternatives for second-line anti-TB drugs and proposes that all supplies be implemented through the GLC procurement agent.**

**How much is this efficient and reliable?**

# **Provision of second-line drugs to Russia/GFATM-supported Project - first lessons learned**

- **Lack of an alternative procurement mechanism in the GFATM-supported Project for supplies of second-line anti-TB drugs**
- **Insufficient logistical organization by the GLC procurement agent**
- **Requirements of national Regulations for Drugs**



**= 1st supply - delivery period > 1 year  
(Arkhangelsk – 200 patients)**

**= 2nd supply - delayed (Arkhangelsk, Orel,  
Vladimir, Khakassia – 887 patients)**

**= future deliveries - vague dates**

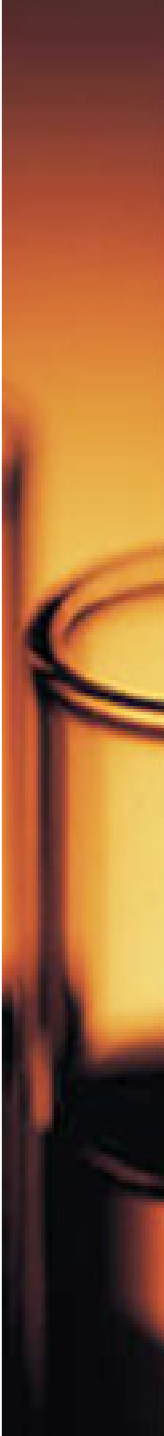
# Summary

- Enrollment process through applying to GLC to have access to second-line drugs and treat 7 500 MDR-TB patients in the GFATM-supported Project comes to its final stage
- The existing mechanism of procuring second-line drugs in the Project is challenged by significant difficulties. This threatens the implementation of the DOTS-Plus component in the Project
- Lack of reliable delivery practices for second-line drugs does not allow for accomplishing the goals in the GFATM-supported Project

# **Measures to address problems with procurement of second-line drugs**

## **Urgent improvement of the existing procurement mechanism:**

- **Establish a reserve stock of second-line anti-TB drugs at the supplier level**
- **Improve the management at the supplier level and communication with partners**
- **Identify delivery practices that correspond to national laws regulating import of medicines**
- **Identify additional stimuli for drug manufactures to enhance their cooperation with GLC and drug registration**



**Identification of an  
alternative practical  
mechanism to procure  
second-line drugs in  
context of the GFATM-  
supported Project?**

**Thank you!**

