

## Message from the Chair and the Secretariat of the TB/HIV Working Group on the Occasion of World Aids Day

Dear members of the TB/HIV Working Group and friends of TB/HIV,

WHO between 2002-2010.

Please find below brief updates about the activities of the Working Group and its Secretariat on the occasion of World AIDS Day, which this year is calling for the global community to focus attention on protecting human rights of all people affected by HIV.

- 1. New guidelines for Intensified Case Finding and Isoniazid Preventive Therapy for People Living with HIV in resource constrained settings launched on World AIDS Day: The objective of these guidelines is to provide guidance to national AIDS and tuberculosis programmes and those providing HIV services to accelerate the nationwide implementation of IPT and ICF. They include evidence-based recommendations for adults, children and infants living with HIV, address implementation issues and identify key research gaps in order to scale up TB prevention, diagnosis and treatment as a core component of HIV prevention, treatment and care. They are aimed at policy-makers and health programme managers, governments, nongovernmental organizations, donors and patient support groups working in the field of HIV/AIDS and TB, and health-care workers providing care for people living with HIV. The new guidelines can be accessed at the following link: <a href="http://whqlibdoc.who.int/publications/2011/9789241500708\_eng.pdf">http://whqlibdoc.who.int/publications/2011/9789241500708\_eng.pdf</a>
- 2. Progress in the global monitoring of TB/HIV activities: Two years ago the TB/HIV indicators, collected by WHO, were harmonized with those recommended by PEPFAR, UNAIDS and the Global Fund by means of a series of global consultations. The PEPFAR revised indicators now include the harmonized TB/HIV indicators for screening for TB and treatment for TB of people in HIV care. PEPFAR requested that countries report these indicators for the first time in 2010 and preliminary results have shown impressive improvement in recording and reporting of these TB/HIV activities. In order to streamline the monitoring of TB/HIV activities into the mainstream of HIV services and avoid duplication of efforts, data on TB screening and the provision of isoniazid preventive therapy will now be regularly collected and reported only to

the HIV Department of WHO. These data have been collected by the Stop TB Department of

- 3. Priority research questions for TB/HIV in HIV-prevalent and resource-limited settings defined and document released: Following a year long consultative process WHO and the TB/HIV Working Group Secretariat finalized and released the document that defined the priority TB/HIV research agenda. The document reviewed the latest available evidence in six key areas, defined the research gaps and identified the priority research questions. These priority research questions require urgent and unprecedented scientific interest from TB and HIV researchers and resources from funding agencies to ensure their implementation. The document is available at:
  - http://www.stoptb.org/wg/tb\_hiv/assets/documents/priority\_research\_web.pdf French translation is available. Spanish and Russian translation will be released soon.
- 4. The Coordinating Board of the Stop TB Partnership expressed its concern about mandatory hospitalization of uncomplicated TB in Eastern Europe and Central Asia: The 16th TB/HIV Core group meeting that was held from 26th-28th May in Almaty, Kazakhstan in Almaty has identified mandatory hospitalization of uncomplicated TB in addition to other systemic factors as a key barrier for the scale up of collaborative TB/HIV activities in the region (the meeting

report is available at the following link: <a href="http://www.stoptb.org/wg/tb\_hiv/meetings\_core.asp">http://www.stoptb.org/wg/tb\_hiv/meetings\_core.asp</a>). This concern of the Core Group was presented and discussed at the 19th meeting of the Coordinating Board of the Stop TB Partnership that was held in Johannesburg on 14th -15th October 2010. The Board expressed its concern about the mandatory hospitalization of uncomplicated TB and its implication in scaling up collaborative TB/HIV activities in the region and encourages WHO HQ and EURO to work in order to address this issue, taking into consideration its complex nature.

- 5. TB REACH announces a second call for proposals with deadline for proposal submission at end of February 2011. Housed at the secretariat of the Stop TB Partnership, TB REACH awards grants of up to US \$1,000,000 for a one year period to selected institutions or organizations from eligible countries. Examples of suitable TB/HIV projects for this year's call include the implementation of intensified TB case finding and treatment and, in these projects, provision of isoniazid preventive therapy among people with HIV using the new IPT/ICF guidelines. For further details on eligible countries, examples of other suitable proposals and for the proposal guidelines please refer to the following link: <a href="http://www.stoptb.org/global/awards/tbreach/wave2.asp">http://www.stoptb.org/global/awards/tbreach/wave2.asp</a>. The support of the Canadian International Development Agency (CIDA) to this important initiative of the Stop TB Partnership is acknowledged.
- **TB/HIV Research Meeting** The World Health Organization and the TB/HIV Working Group in collaboration with the Consortium to Respond Effectively to the AIDS/TB Epidemic (CREATE) will be organizing a TB/HIV research meeting on 27<sup>th</sup> February, 2011, in conjunction with the Conference on Retroviruses and Opportunistic Infections (CROI) in Boston, USA being held between 27<sup>th</sup> February 2<sup>nd</sup> March, 2011. Further information on the agenda and venue of the meetings will be communicated in due course.

Dr Diane Havlir Chair Dr Haileyesus Getahun Secretary