



Barents TB Programme

Prof. Andrey Maryandyshev,
Northern State Medical University/Archangelsk

Developed by:

Managers of TB services and AIDS centres in the Barents Region, representatives of the NDHPS, experts from Filha and LHL, St-Petersburg TB Research Institute, Northern State Medical University, etc.

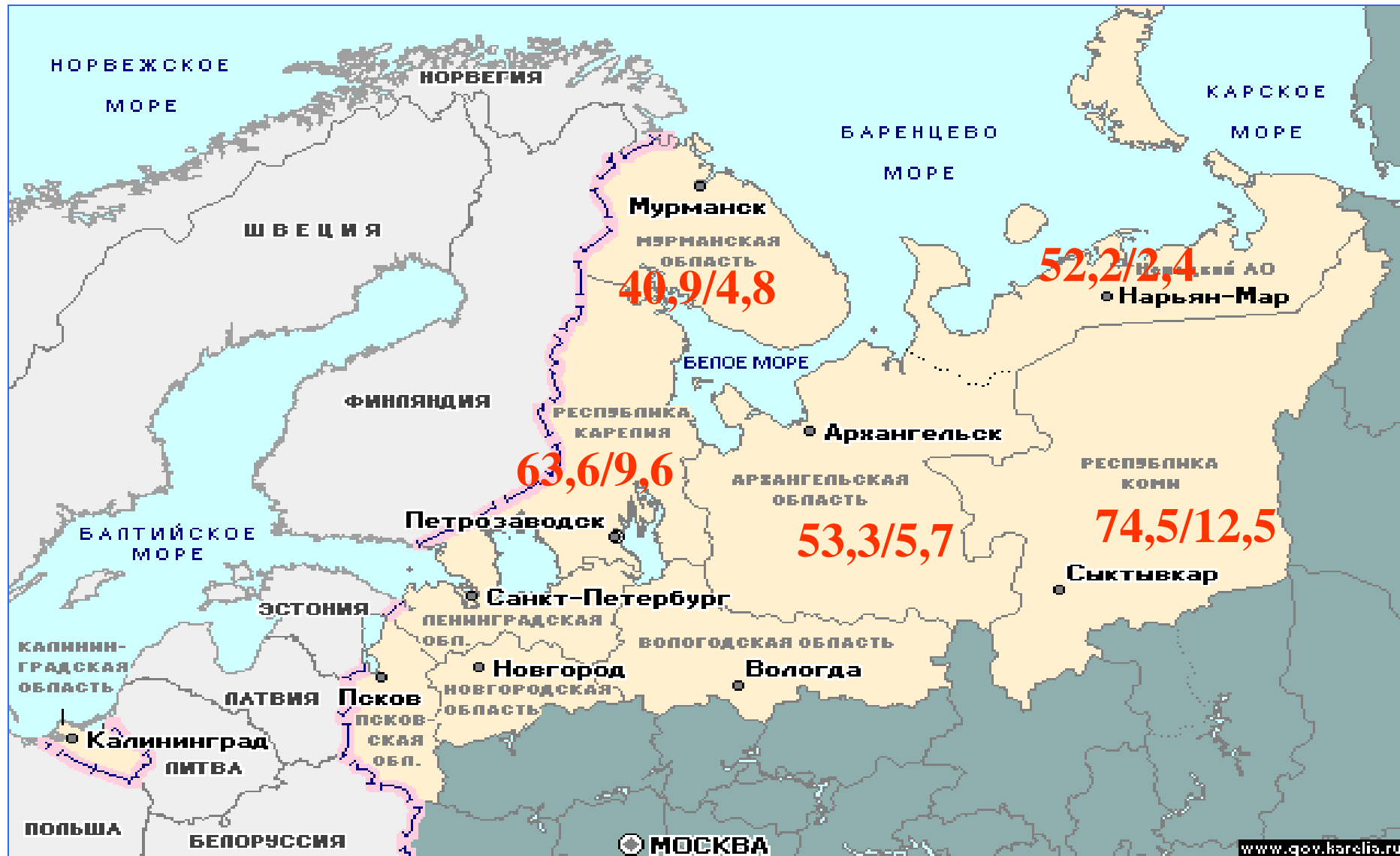
The overall goals of the Barents TB Programme are:

- Further reduction of TB-associated morbidity and mortality, achievement of the 2003 Kirkenes Declaration's goals
- Prevention of trans-boundary spread of TB
- Early diagnosis and treatment of MDR TB
- Prevention of XDR TB based on rational resource management, reduction of economic costs and upgrade of the TB service.

Terminology

- Drug-sensitive tuberculosis – 6-month therapy with 4 first-line drugs
- Multi-drug resistance – resistance to at least isoniazid and rifampicin. The therapy lasts for 2 years with 5 second-line drugs
- Extensive drug resistance means multi-drug resistance plus resistance to any aminoglycoside (polypeptides) and fluoroquinolone. No strategy of XDR TB management has yet been developed.

TB mortality and morbidity/100000, 2010



New Strategy “Stop TB 2006-2015”

Accessibility of effective services

- To strengthen and adapt DOTS in the view of current issues:
- Control of TB+HIV and MDR/XDR TB
- To draw all levels of health care; contribution into the healthcare system reinforcement
- To mobilize society; to authorize patients to solve problems
- To support research and development of new methods

Measures:

- 1. 1. Further development of links between Russia and Scandinavian countries
 - 1.1.1 Establishment of Barents TB Programme Steering Committee
 - 1.1.1.1 Nominating members into the SC
 - 1.1.1.2. Applying financing for coordination of the Programme
 - 1.1.1.3. Organising meetings for the SC
 - 1.1.2. Establishment of professional TB societies
- 1.2. Improving multilateral information system for TB and TB/HIV in Barents region
 - 1.2.1 Improve the system of recording and analysis of statistics
 - 1.2.2. Improve exchange of information
- 1.3. Develop independent high level research

2.3. TB prevention among HIV-positives

- 2.3.1. Development of methodological recommendations on preventive treatment of TB among HIV-infected
- 2.4. Increase the use of WHO guidelines on TB among HIV+
- 2.5. Improve preventive TB treatment among contacts
- 2.6. Provide information on TB and HIV to general population

3.1. Improve implementation of the existing infection control plans

- 3.2. Separate different patient groups according to their infectivity (sm+ and sm-)
- 3.3. Isolate infectious TB patients
 - 3.3.1. Develop common standards for organisation of MDR TB treatment units
 - 3.3.2. Establish isolation units for infectious MDR TB
 - 3.3.3. Isolate XDR patients (hospice)
- 3.4. Establish effective referral mechanism between different HIV and TB treatment delivery sites
- 3.5. Create effective mechanisms for providing TB control services for HIV-infected
- 3.6. Improve the infection control norms on the basis of experiences of Nordic countries

4.1. Improve the existing diagnostic mechanisms

- 4.1.1. Organize free-of-charge accessible medical examinations in case of suspicion of TB
- 4.1.2. Introduce external quality control
- 4.1.3. Centralize smear microscopy services
-
- 4.2. Early (timely) diagnosis of MDR TB
- 4.2.1. Increase the use of advanced rapid TB diagnostics techniques in Barents Region
- 4.2.2. Implement rapid drug sensitivity testing of TB
- 4.2.3. Provide cost-effectivity analysis of new rapid diagnostic methods
-
- 4.3. Inform people about important symptoms and the availability of medical services
-
- 4.4. Improved access of vulnerable groups to diagnostic services
- 4.4.1. Make use of the best Nordic models of working with risk groups in Barents Region
- 4.4.2. Establish mobile centres for examining risk groups in coordination with social services
- 4.4.3. Involvement of risk groups using peer & peer approach into diagnostics
- 4.4.4. Expand low threshold services for vulnerable groups
-
- 4.5. Creation of a uniform basis for molecular diagnostics in Barents region

5.1. Improved adherence to TB treatment

- 5.1.1. Joint training of health care workers in communication
 - with patients and mass media
- 5.1.2 Common training seminars for specialists in civilian sector and
 - prison system
- 5.1.3. Development of outpatient treatment and day care
 -
- 5.2. Improve drug management
 - 5.2.1. Training of personnel on treatment standards
 - and filling applications for drugs
 - 5.2.2. Establishment of a mechanism for supplying
 - drugs to Barents region (centralised supply)
 - 5.2.3. Adequate procurement and distribution of drugs
 - 5.2.4. Good management of adverse drug reactions

6.1. Training of medical personnel on accurate and timely diagnosis on TB, HIV and MDR-TB

- 6.2. Training seminars on infection control for medical personnel and TB patients
- 6.3. Organise peer work training in TB+HIV related questions
- 6.4. Training of specialists on drug management
- 6.5. Provide training on the role of the primary health care in successful treatment of TB patients
- 6.6. Training seminars on management of patients with co-morbidities
- 6.7. Training of primary health care specialists on good care of TB patients
- 6.8. Ensure the adequate quality and quantity of human resources in both civilian and penitentiary TB care
- 6.9. Improve the knowledge on TB in Norway, Sweden and Finland

7.1. Improve involvement of the society

- 7.1.1. Organize patient associations
- 7.1.2. Involve patient representatives to coordination bodies
- 7.1.3. Involve NGOs in Barents TB Programme activities
- 7.1.4. Organize regional “Stop TB Partnership”
-
- 7.2. Improve government commitment
- 7.2.1. Provide credible information to authorities on Barents Region
- countries about the TB and TB/HIV situation
- 7.2.2. Organize Inter-sectoral Coordination Councils for PHC and TB services

8.1. Improve collaboration between health service institutions in civil and prison sectors, social services, narcological services and NGOs

- 8.1.1. Develop an inter-sectoral agreement (penitentiary, civil and NGOs)
- 8.2. Enhancement of social programmes
- 8.3. Develop interactive mechanisms with migration services on
 - treatment of migrants
- 8.4. Provision of credible information for authorities on TB and HIV in order to enhance the interaction of the programmes on local level

Thank you for attention!