

# **Regional Green Light Committee**

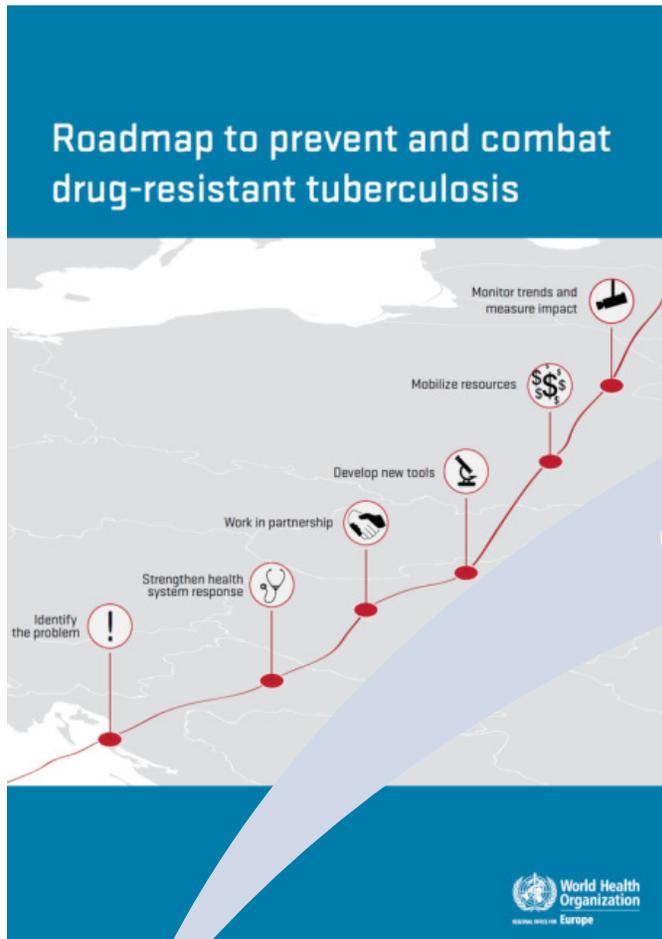
## **Europe**

- **2<sup>nd</sup> Meeting of the Core Group of the Global Drug-resistant Initiative**
- **Date: 27 October 2014**
- **Barcelona, Spain**

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European rGLC

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Consolidated Action Plan to Prevent and Combat M/XDR-TB in the WHO European Region, 2011–2015 (follow-up plan under development, in line with global post 2015 End TB Strategy)



**Why an Action Plan & process of development**

**Endorsement by RC in Baku, Azerbaijan, 2011**

**Progress since 2011**

# Consolidated Action Plan to Prevent and Combat Multidrug- and Extensively Drug-resistant Tuberculosis in the WHO European Region



Prevent the development of M/XDR-TB



Scale up access to effective treatment



Scale up access to early diagnosis



Improve infection control



Strengthen surveillance

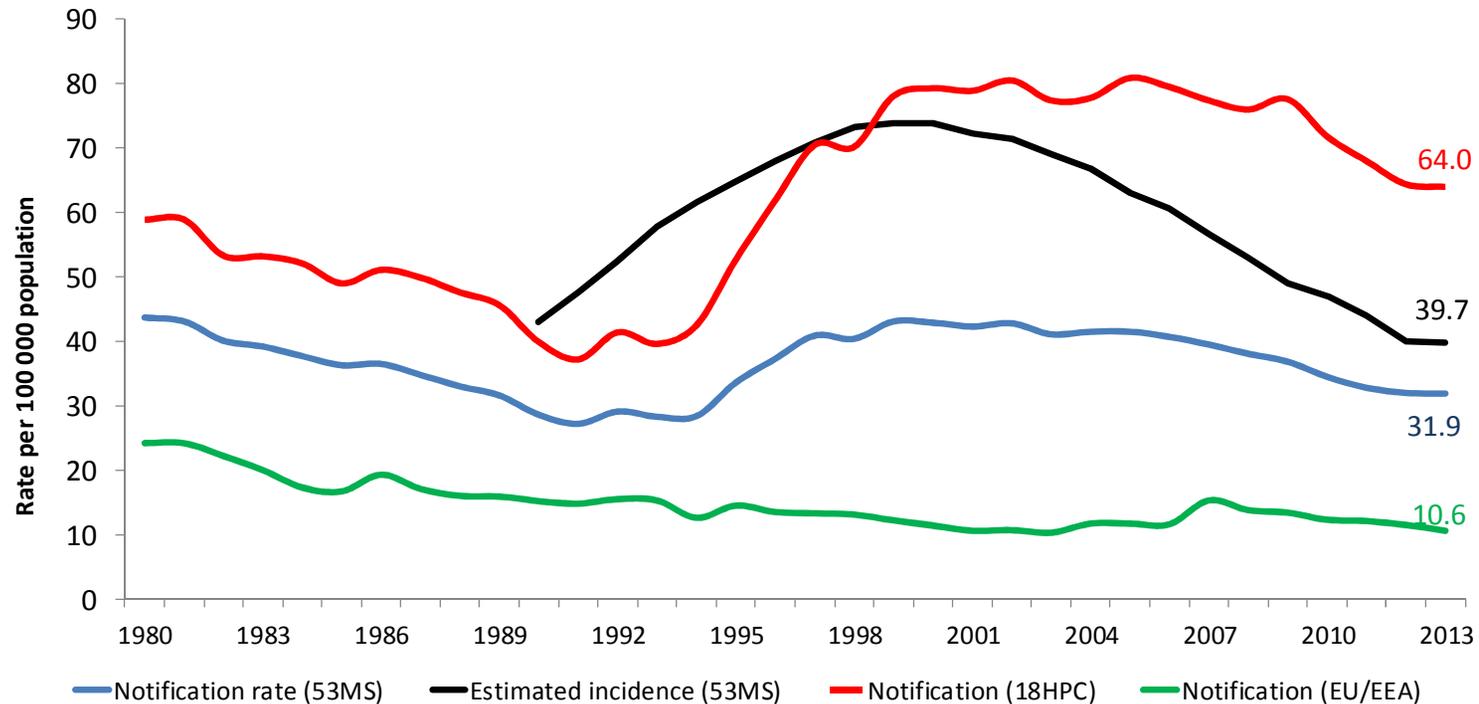


Expand management capacity of the programmes



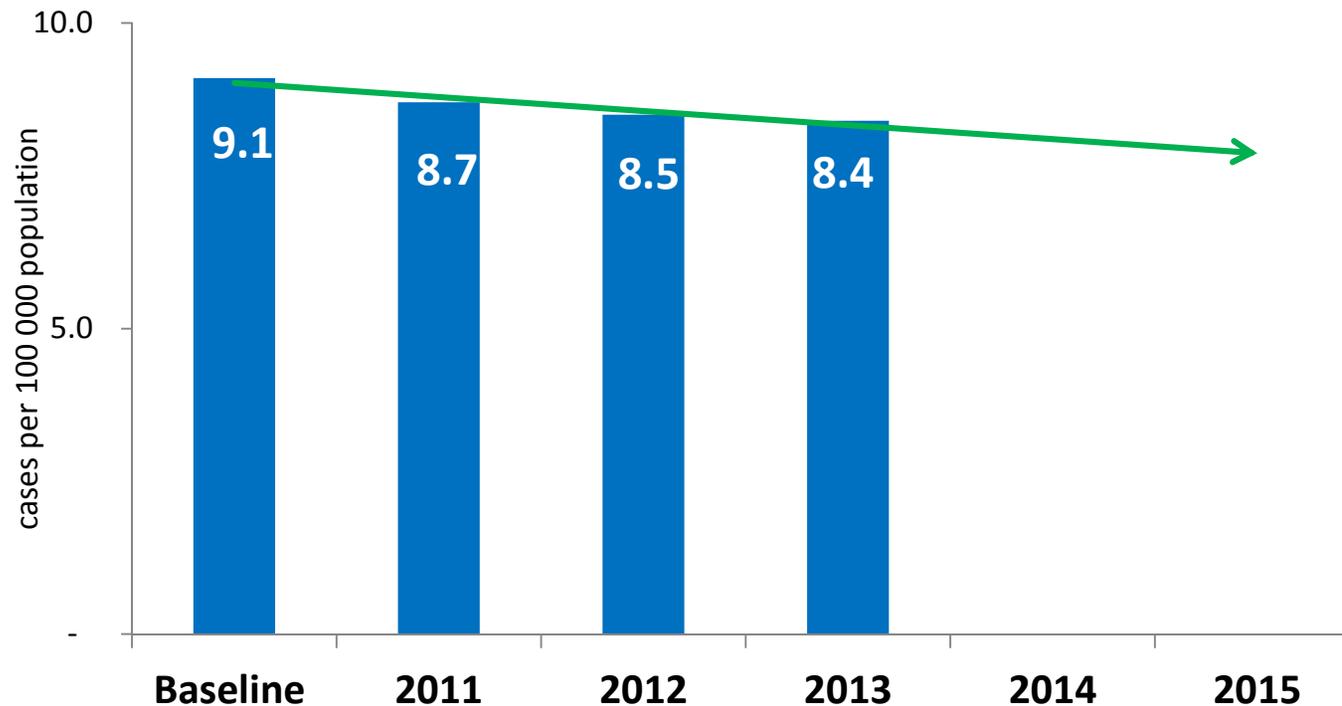
Address the needs of special populations

# TB burden unequally distributed among countries (TB notification rate)



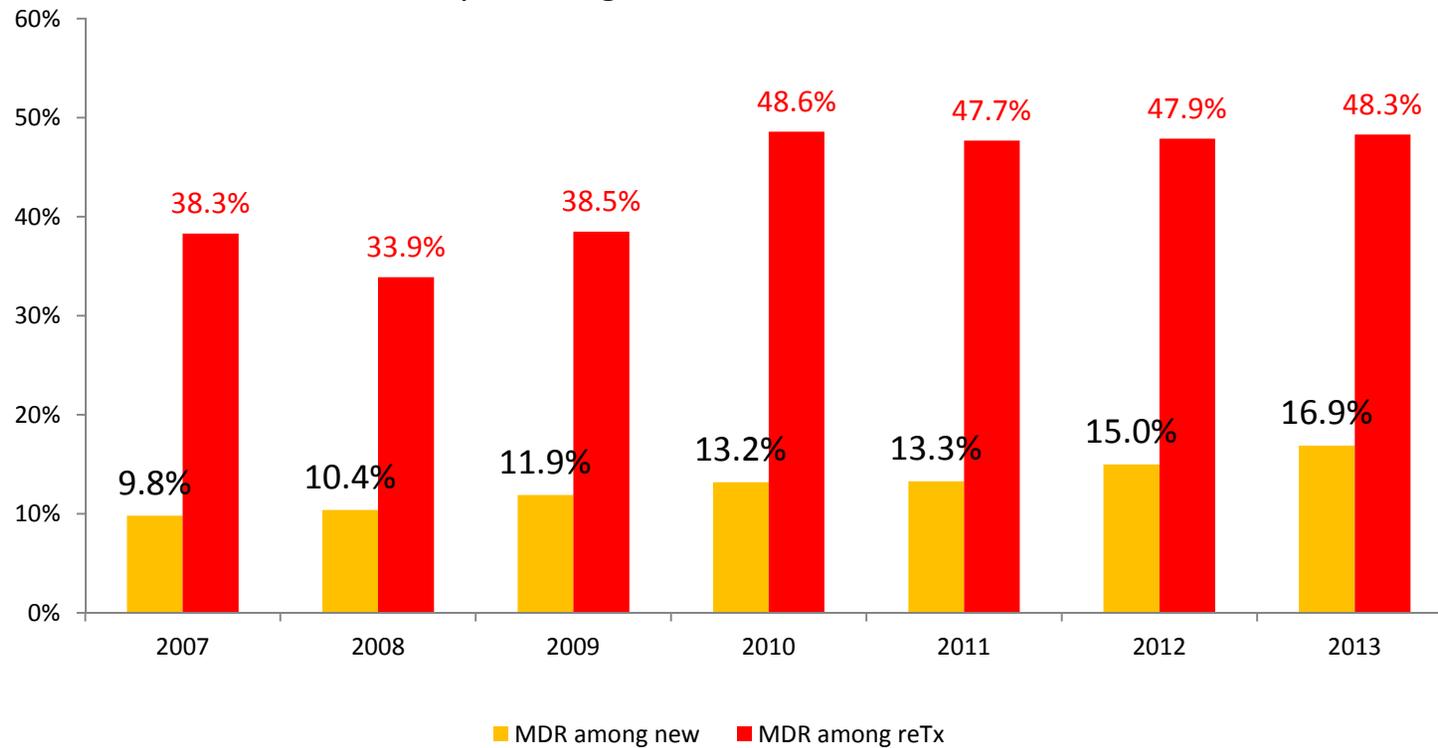
# Absolute number of cases appears to be decreasing

Estimated number of all MDR-TB cases  
per 100.000 population, WHO European Region



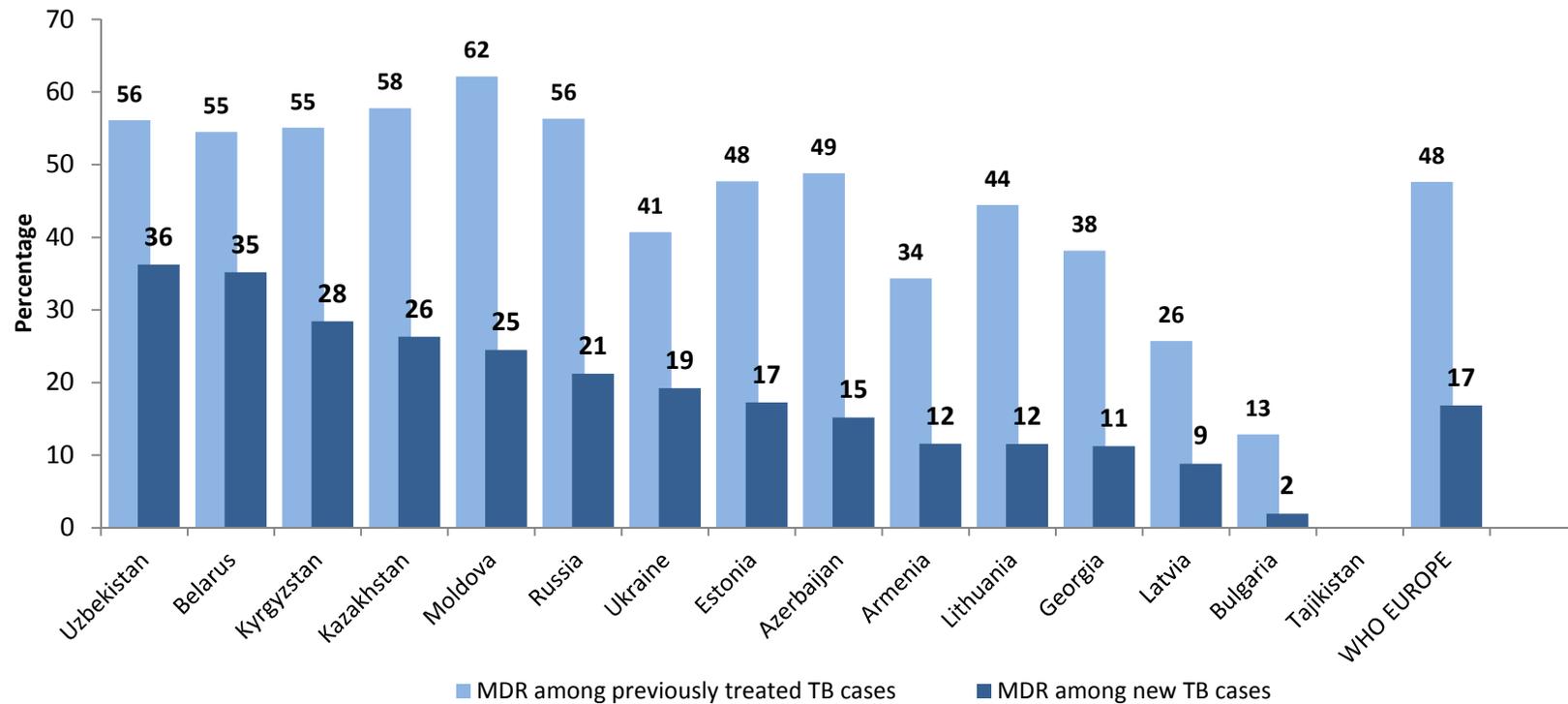
# However, % of MDR-TB is still on the rise

Percentages of notified MDR among TB cases,  
WHO European Region, 2005-2013



Source: European Centre for Disease Prevention and Control / WHO Regional Office for Europe. Tuberculosis surveillance and monitoring in Europe 2014.  
2013 data is preliminary and is extracted from Global TB database

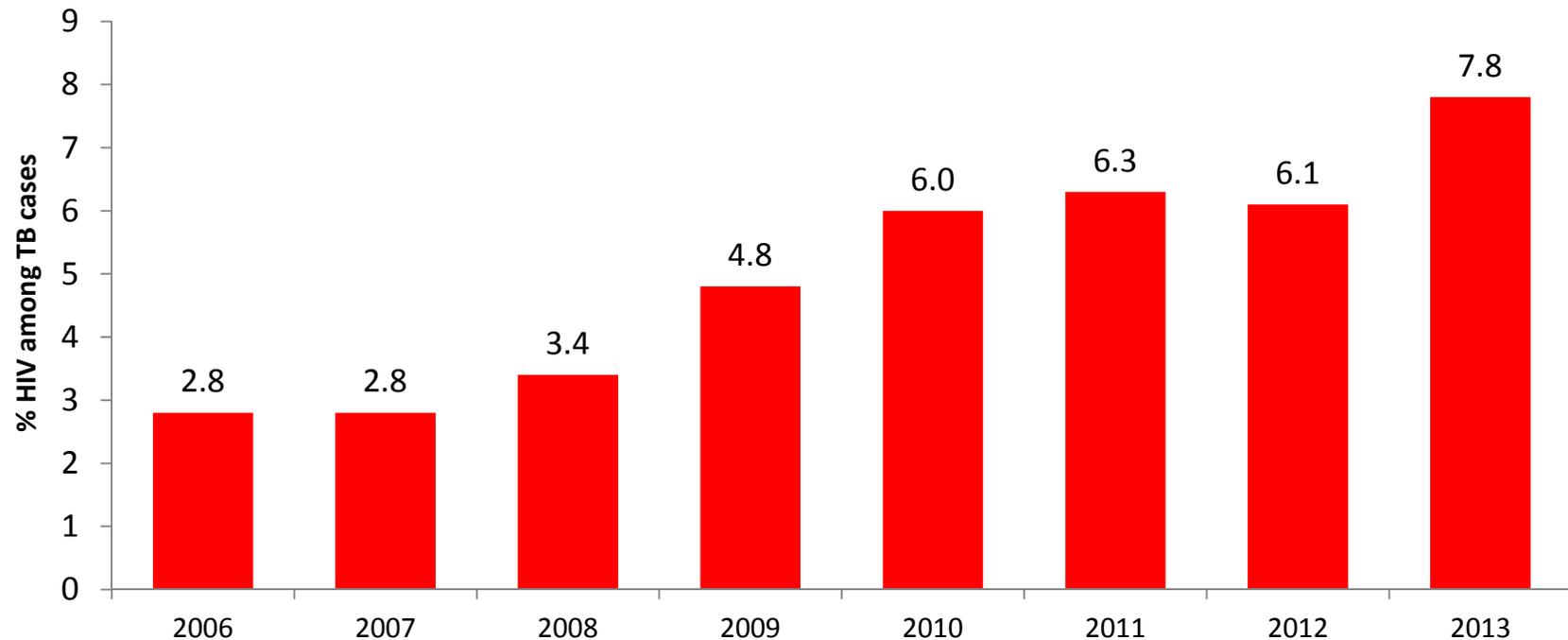
# High MDR-TB countries; WHO Europe 2013



Source: Global TB database: Preliminary data

# Leading killer among people living with HIV

- About **17,000** (81%) TB cases with HIV co-infection were detected out of about 21 000 estimated.
- Only **53.8%** of them were offered antiretroviral treatment.



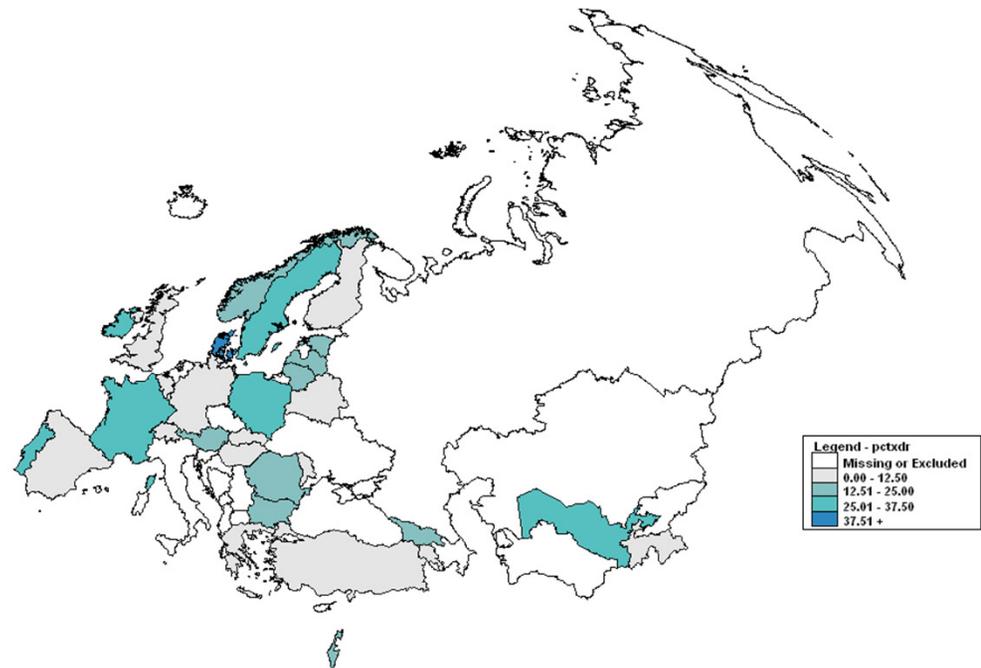
Source: European Centre for Disease Prevention and Control / WHO Regional Office for Europe. Tuberculosis surveillance and monitoring in Europe 2014.  
Data source for 2013 is Global TB database: 2013 results are preliminary

# Burden of XDR TB is largely uncertain

Percentage of notified TB cases with XDR-TB among MDR-TB patients with SLD results, WHO European region, 2013

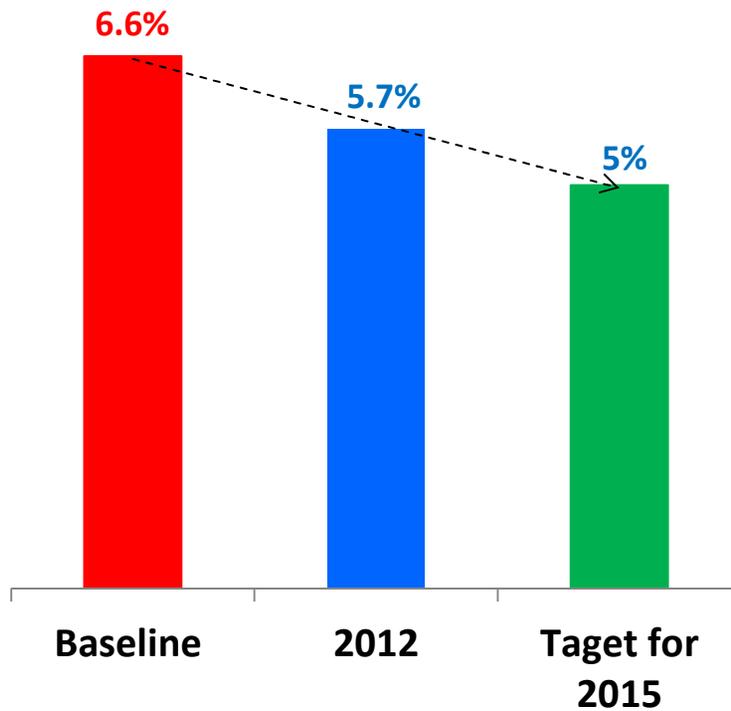
**52%** of notified MDR have SLD DST results (out of reporting countries)

In total **525** (12.8%) XDR patients notified in 2013



Source: Global TB database –preliminary data

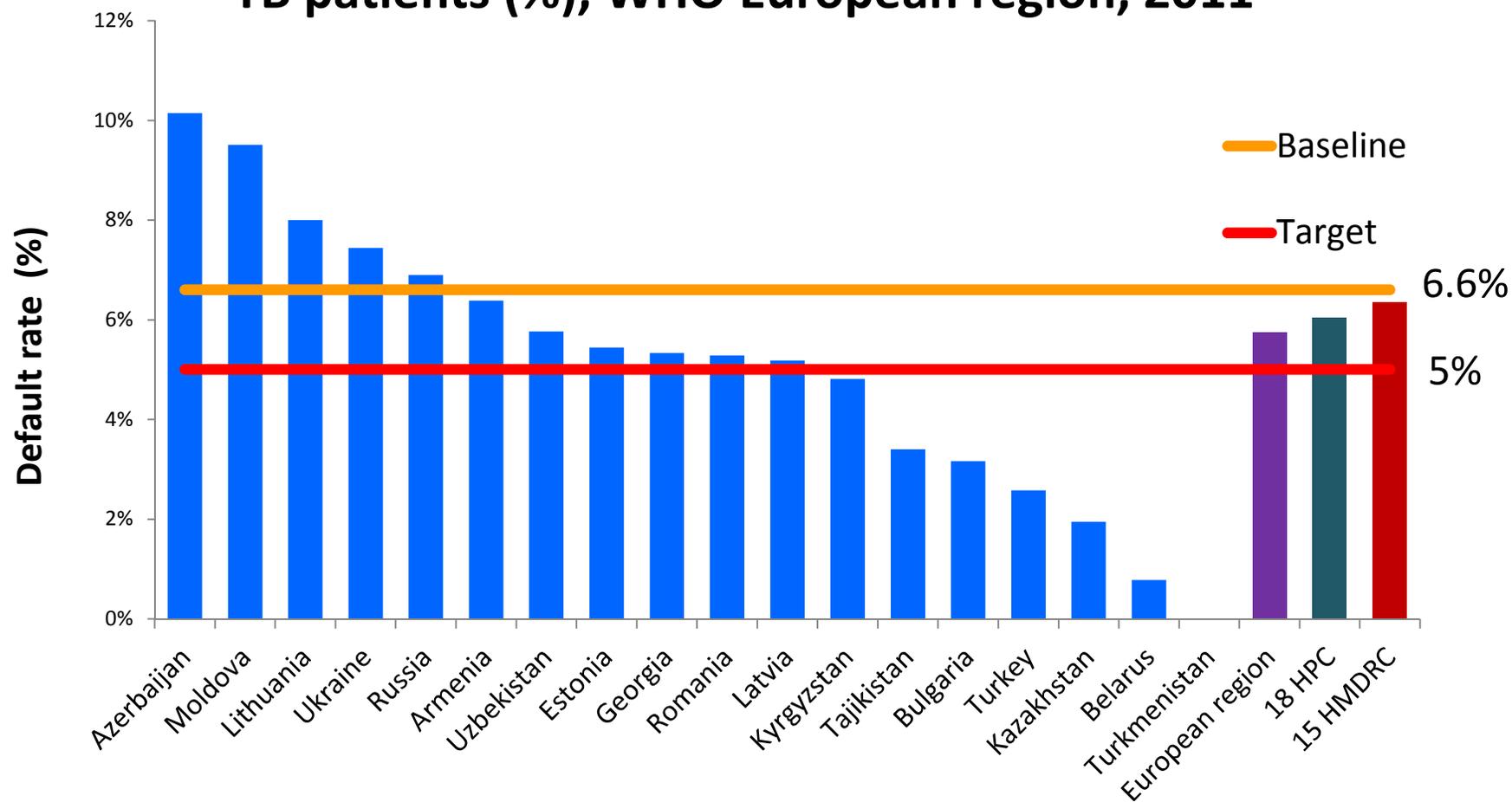
# Default rate among new laboratory confirmed TB patients



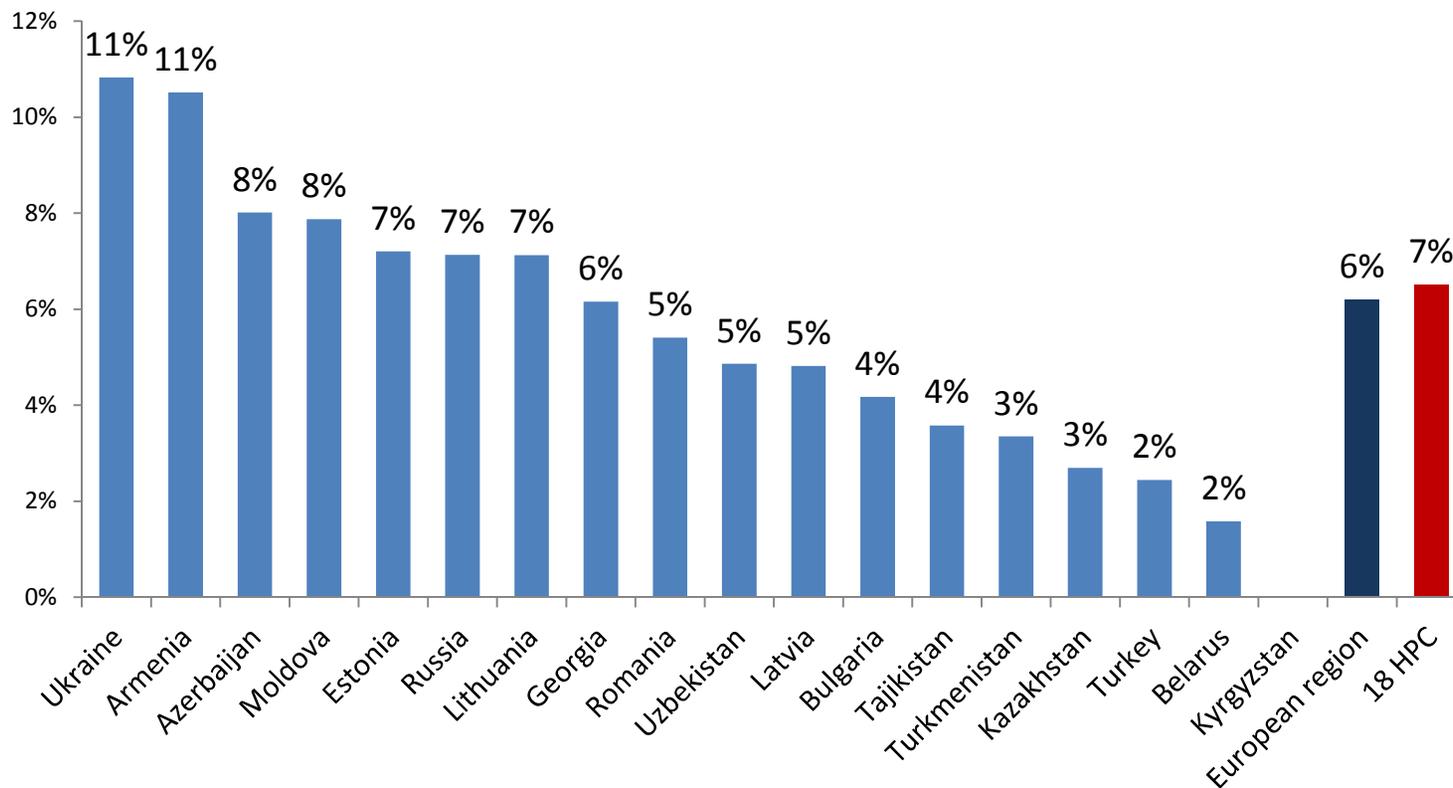
**Prevention of treatment interruption  
is a key to close the MDR tap**

**Patient-centered care approach**

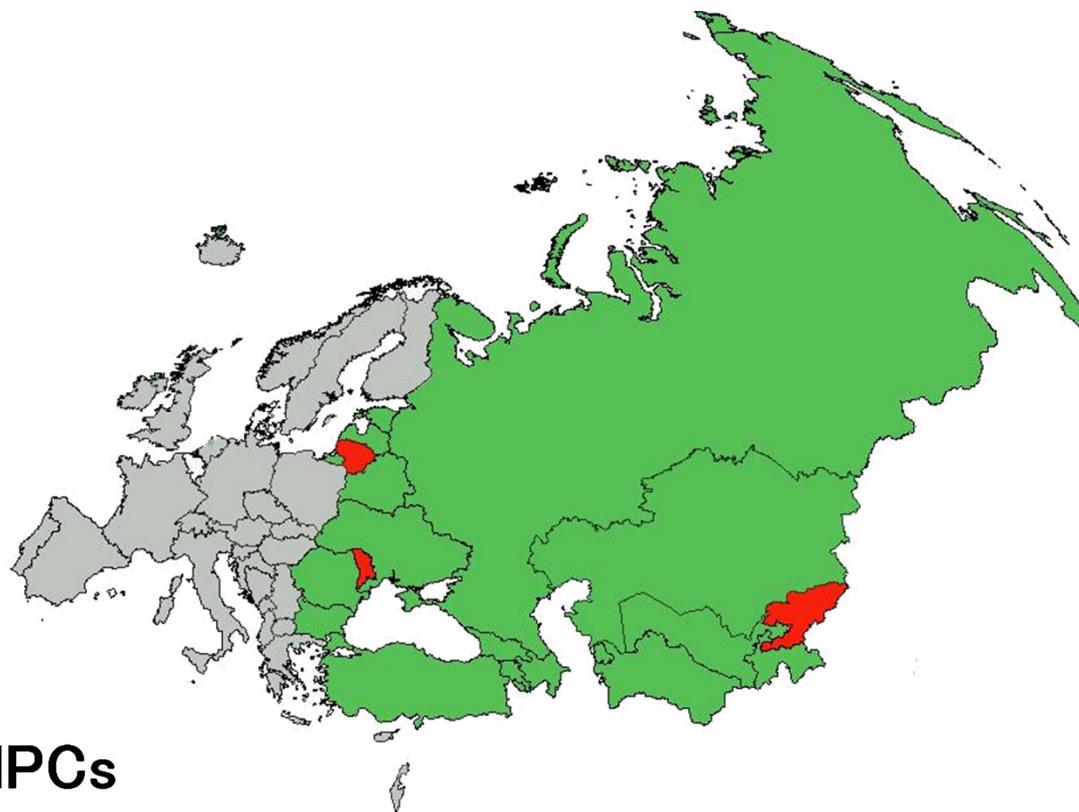
## Default rate among new laboratory confirmed TB patients (%), WHO European region, 2011



# Lost-to-follow up rate among new and relapse TB patients in 18 HPCs, WHO European Region, 2012



# Member states among 18 HPCs with no stock out of first line TB drugs at any level



**In 3 countries among 18 HPCs**

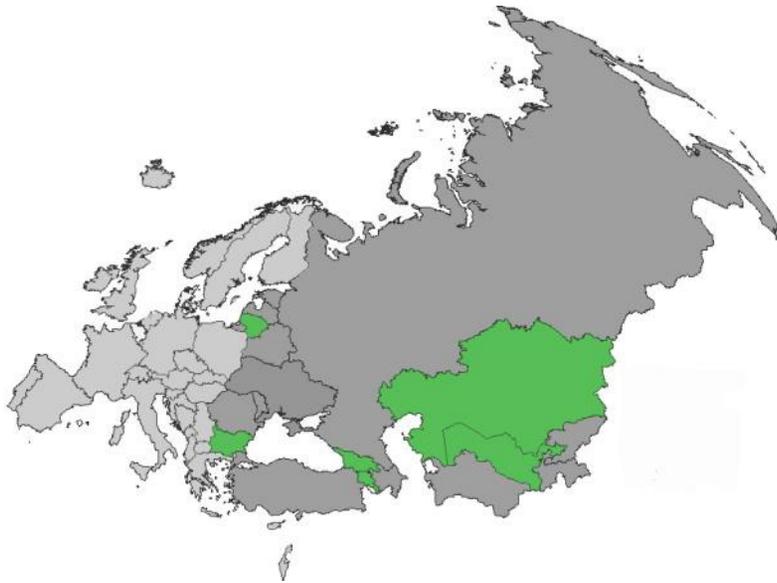
**There was stock out of first line TB drugs**

# Countries using X-pert MTB/RIF in 2013

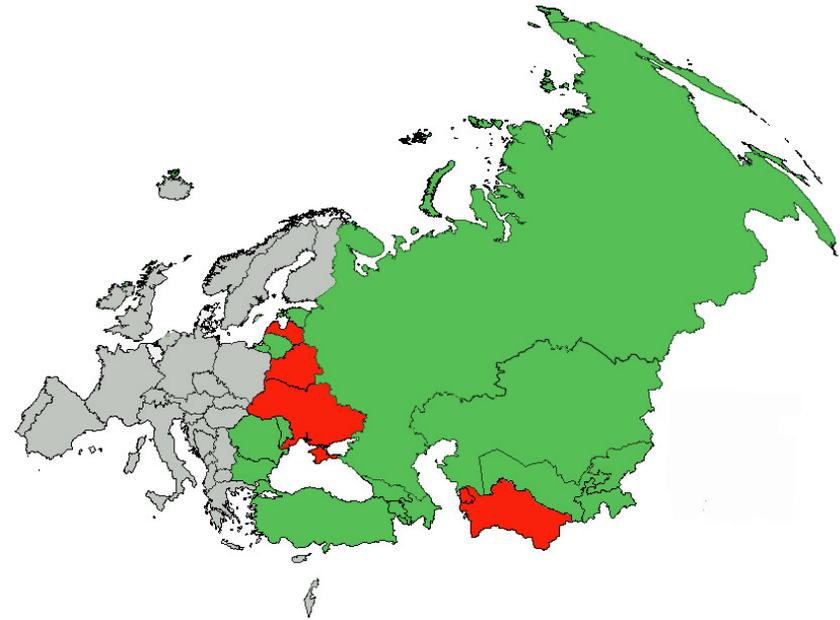
**All high priority countries in the Region except Romania, reported use of X-pert MRB/RIF in 2013**



# Member states with TB infection control plan endorsed



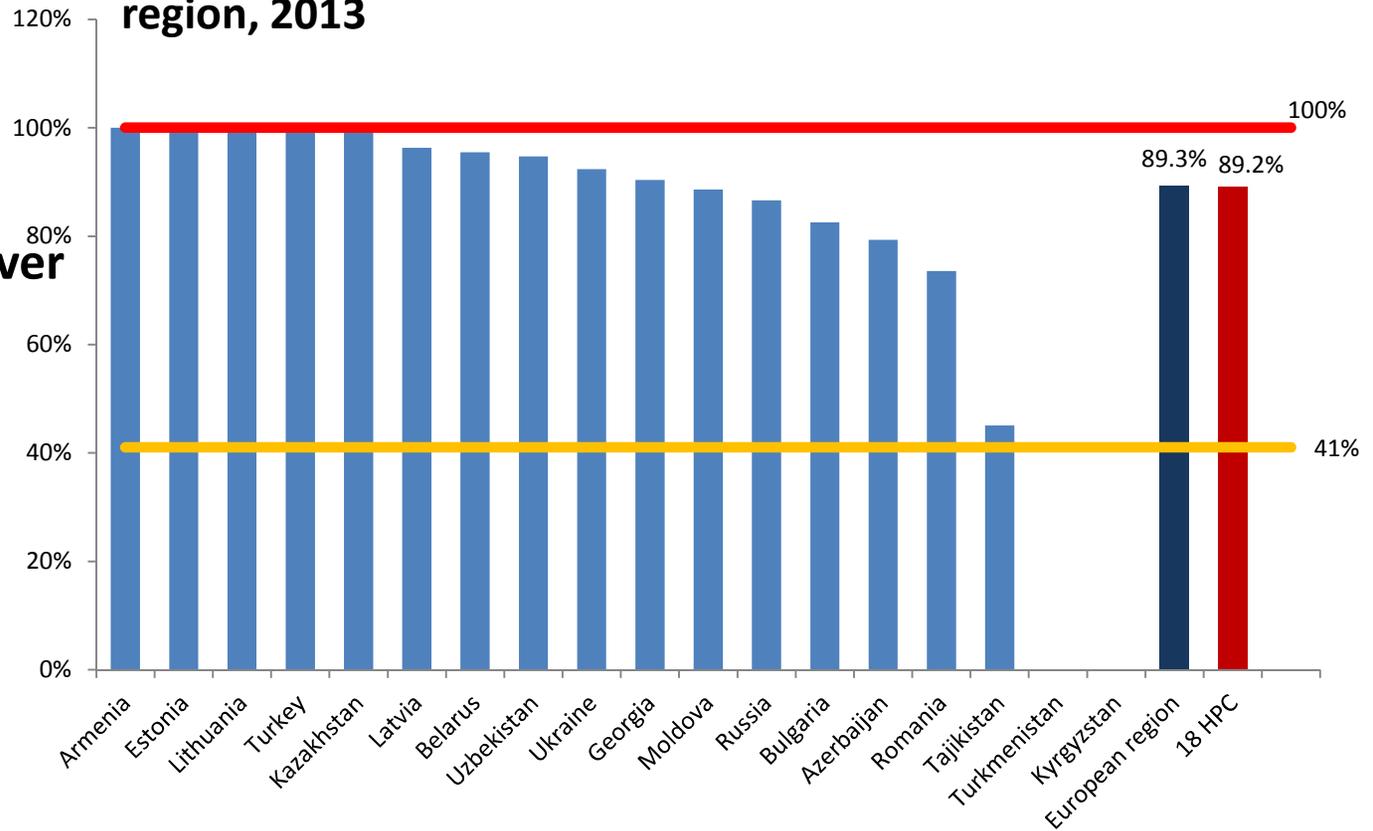
**In 2012 8 HPCs only endorsed TB-IC plan**



**By end of 2013 all HPCs endorsed TB-IC plan, except Latvia, Belarus, Ukraine and Turkmenistan.**

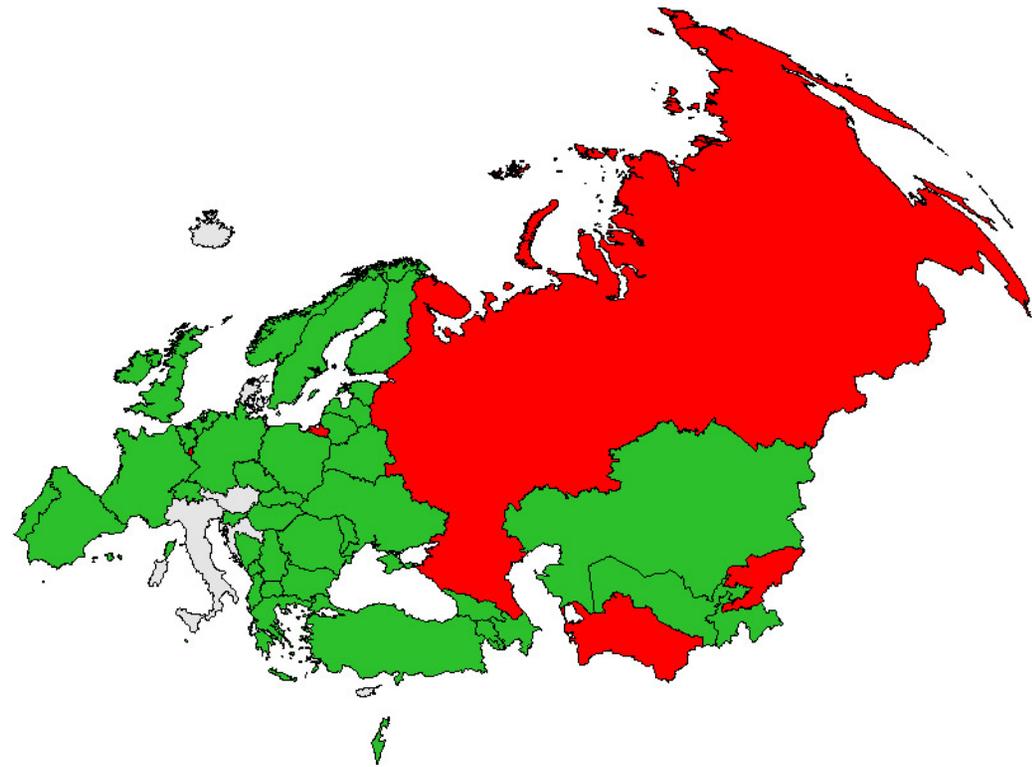
## Coverage of first line DST among notified previously treated TB patients with positive culture, WHO European region, 2013

**10** HPCs have over  
**90%** DST  
coverage



# Member states with electronic case-based data management at least for MDR TB

**41** Member states maintain electronic case-based data management system at least for MDR TB patients at national level.



# Key contributions by rGLC Europe

- All HPC have country adapted M/XDR-TB plans
- Input to workshop on efficient management tools in TB prevention and care
- Assessing possible causes of loss-to-follow up within ongoing health care reforms
- Input to country adapted infection control plans
- Assessing underlying causes of lack to access of second line drugs
- Contribution to rational introduction of Bedaquiline at country level through consilium approach
- Continue regional and country PMDT mentorship programme
- Close linkage and collaboration with other regional and global initiatives, such as GDI, GDF, ELI, childhood TB taskforce, GFATM and TBTEAM, thus strengthening synergies and effectiveness

# Way forward

- Support member states and regional initiative in adapting the post 2015 End TB Strategy (national PMDT relevant plans, protocols and guidelines);
- Continue to share best practices for models of care and scaling up patient-centred ambulatory care;
- Contribute to a Plan in strengthening TB laboratory diagnosis;
- Continue introduction and rational use of new TB drugs and heightening Pharmacovigilance capacity
- Continue regional mentorship program
- Contribute to improve country-suitable PMDT relevant models of care
- Contribute to improved results-based management strategies for PMDT, including enhanced approaches to surveillance (i.e. better incorporating pharmacovigilance)
- Continue to link to novel diagnostic tools and approaches and advocate for them (in line with WHO recommendations)

# Acknowledgements

- rGLC secretariat, Drs Masoud Dara and Martin van den Boom

Thank you for your attention