Report of the Ninth Meeting of the European Technical Advisory Group on Tuberculosis Control

Copenhagen, Denmark, 25–26 November 2014
ABSTRACT

The Ninth Meeting of the European Technical Advisory Group on Tuberculosis Control was held in Copenhagen on 25–26 November 2014. The objectives of the meeting were to: (i) review the epidemiology of TB and drug-resistant TB in the WHO European Region, including the burdens and trends; (ii) review progress in implementing the recommendations of the Eighth Meeting of the European Technical Advisory Group; (iii) review progress in implementing The Consolidated Action Plan to Prevent and Combat Multidrug- and Extensively Drug-Resistant Tuberculosis in the WHO European Region 2011–2015; and (iv) review the draft of, and make technical inputs into, the Tuberculosis Action Plan for the WHO European Region, 2016–2020.

Keywords
INTEGRATED HEALTH CARE SYSTEMS
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TUBERCULOSIS, EXTENSIVELY DRUG-RESISTANT
TUBERCULOSIS, MULTIDRUG-RESISTANT
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Abbreviations

MDR-TB    multidrug-resistant TB
TB-AP     Tuberculosis Action Plan for the WHO European Region, 2016–2020
XDR-TB    extensively drug-resistant TB
Introduction

The Ninth Meeting of the European Technical Advisory Group on Tuberculosis Control was held in Copenhagen, Denmark, on 25–26 November 2014.

The overall objective of the Group is to provide advice to the WHO Regional Office for Europe on strategic directions and specific technical areas related to the prevention, control and care of TB and drug-resistant TB.

The specific objectives of the Meeting were to:

- review the epidemiology of TB and multidrug-resistant (MDR) TB in the WHO European Region, including the burdens and trends;
- review the progress made in implementing the recommendations of the eighth meeting of the Technical Advisory Group held on 12 November 2013;
- review the progress made in implementing the Consolidated Action Plan to Prevent and Combat Multidrug- and Extensively Drug-Resistant Tuberculosis in the WHO European Region 2011–2015;
- review the draft Tuberculosis Action Plan for the WHO European Region, 2016–2020 (TB-AP) and provide technical inputs.

Election of Chairperson and Vice-Chairperson

In line with the terms of reference of the Technical Advisory Group, Michael Kimerling of the Bill & Melinda Gates Foundation was elected new Chairperson and Phillip du Cros of Médecins Sans Frontières United Kingdom was elected Vice-chairperson.

Main conclusions and recommendations

The Technical Advisory Group is positive about the progress made on the Consolidated Action Plan over the past year and congratulates the Regional Office, country offices and Member States on the achievements. Congratulations are also extended to the current and former members of the Group for their continuing support for the work on TB control in the Region.

TB Action Plan for the WHO European Region, 2016–2020

Following a review of the lessons learned from the Consolidated Action Plan 2011–2015, a new Tuberculosis Action Plan for the WHO European Region 2016–2020 is being developed. A writing group is drafting an outline for the Plan and a TB-AP advisory committee has been established. On the basis of inputs from the advisory group and from regional and public consultations, it is expected that the Regional Committee will be able to endorse the Plan in September 2015.

The Technical Advisory Group welcomes and endorses the development of the new five-year action plan and supports the process proposed for its development.
The overall recommendation of the Group is that the Plan should be more ambitious. Specifically, the goal should look beyond 2020 and, with reference to the new global strategy, aim to end TB by 2035. This could be done through a preamble in the introduction. The target “No affected families facing catastrophic costs due to TB” is important and part of an overall ambitious approach. The final decision on how it should be addressed should, however, await the input from a global consultation, which is being organized by WHO headquarters.

The Group recommends that the Plan should be strengthened as regards monitoring and evaluation. A sub-group of the TB-AP writing group should be established to work specifically on the development of a monitoring framework and selection of indicators. Descriptions of the roles and responsibilities of stakeholders in the activities in the Plan should be more specific, and a glossary with definitions of central terms should be included.

**Data analysis**

The Group acknowledges the extensive epidemiological data collected and analysis and emphasizes that it is essential to monitor the progress made, particularly towards the goals of the Consolidated Action Plan and the development of the TB-AP 2016–2020. There is, however, a need to go beyond the pure epidemiological analysis and to analyse data in new ways, taking into account the status of health system reform, social determinants and the correlation between the rollout of rapid diagnosis and increases in the percentages of MDR-TB. The Group recommends that the Regional Office should collaborate with partners to combine TB data with databases available from other sources to undertake new levels of analysis. Consideration could, for example, be given to desegregated cohorts analysis of treatment outcomes by MDR-TB, XDR-TB, MDR-TB/HIV. More evidence is needed about the efficiency and efficacy of treatment in ambulatory TB care.

**Country classification**

The terminology used in the current country classifications (for example, high burden, high priority and high MDR-TB) can give rise to confusion and misunderstanding. The Group recommends that the definitions should be revisited to ensure clarity and that regular reassessments should be made of whether countries are classified correctly. Countries of the Region could be grouped as follows:

- high MDR burden countries grouped by progress against drug-susceptible and drug-resistant TB;
- high priority countries;
- low TB incidence countries.

**TB transmission**

Epidemiological data, specifically data on MDR-TB, indicate that there is continuing transmission in several countries. The Group recommends, therefore, a focus in the new TB-AP on how TB and MDR-TB transmission is stopped in the three above-mentioned country classifications. This will help to distinguish between the varying needs in the Region and support countries in understanding their own TB epidemics, thus allowing for better tailored public health interventions. There should also be a focus on desegregated categories of patient in countries, as some areas of some countries may belong to different groups.
Moving towards ambulatory care

Moving TB care from hospital-based to ambulatory care has been on the global and regional agenda for several decades, although in many countries in the Region the transition is still lagging. In order to build evidence for promoting ambulatory TB care and to monitor its effectiveness better, the Group recommends that TB epidemiological data should be combined with health system financing data so as to document the effect of health care reform on the delivery of TB services, transmission and treatment outcome.

The Group acknowledges that obtaining political commitment to ambulatory TB care in many countries is a challenge and, therefore, recommends that WHO, together with partners, develops a guidance document describing the entire transition process, including an algorithm of the different stages of the transition as well as best practice examples.

Future meetings

The presentation of epidemiological data is a relatively new item during meetings of the Group which is much appreciated. However, given the size and complexity of the Region, the amount of data is overwhelming and the analysis time-consuming. It is, therefore, suggested that future meetings of the Group should be moved to a later date so as to allow more time for analysis and preparation and for data from the joint WHO/European Centre for Disease Prevention and Control surveillance to be finalized beforehand. Slides and other preparatory material relevant to the Group’s members should be posted well in advance of the meetings.

The Group recommended that the following issues should be discussed at the Tenth Meeting.

- New drugs versus new regimens and a focus on rational, safe and efficient introduction of new drugs. More discussion is needed concerning the rationale behind the introduction of new drugs and regimens. Should they be used for failing cases first, for example with XDR-TB, or is there an opportunity to prevent XDR-TB with wider and more proactive use for MDR-TB?
- Health finance and experiences with ambulatory TB care.
- The quality of, and gaps in, information and communication technology in the Region and its relationship to the introduction of new TB drugs and developments in pharmacovigilance.
Annex 1

PROGRAMME

25 November 2014

SESSION 1 Introduction
09:00–09:15 Opening. Nedret Emiroğlu, Deputy Director, Division of Communicable Diseases, Health Security, and Environment (DCE). Masoud Dara, Programme Manager, TB and M/XDR-TB Programme

09:15–09:30 Review of the terms of reference and membership of the European Technical Advisory Group on Tuberculosis Control. Election of new Chairperson and Vice-Chairperson. Masoud Dara

SESSION 2 Report from previous STAG-TB and TAG-TB meetings
09:30–09:45 Summary of the recommendations from the 14th Meeting of the Strategic and Technical Advisory Group for TB (STAG-TB), 16–18 June 2014, Geneva, Switzerland. Alena Skrahina, Member of STAG-TB and Scientific Director, Republican Research and Practical Centre for Pulmonology and TB, Minsk, Belarus

09:45–10:00 TB and drug-resistant TB epidemiology in the WHO European Region: burden and trends. Andrei Dadu, Technical Officer, Tuberculosis & M/XDR-TB

10:00–10:30 Discussion


11:00–12:15 Discussion

SESSION 3 Review of the draft Tuberculosis Action Plan for the WHO European Region, 2016–2020 (TB-AP)
13:30–13:45 Why TB-AP and the process to develop it. Masoud Dara

13:45–14:15 Discussion


14:30–15:30 Discussion

16:00–16:15 TB-AP: targets, pillars. Masoud Dara (on behalf of TB-AP Writing Committee)

16:15–17:15 Discussion

17:15–17:30 Wrap up

26 November 2014

SESSION 3 Continued
09:00–9:15 Update on the post-2015 End TB Strategy. Mario Raviglione, Director, Global TB Programme, WHO headquarters


09:30–10:30 Discussion

16:00–17:00 Main recommendations of the TAG-TB 9th Meeting. Chairperson

17:00–17:10 Closure of the meeting. Zsuzsanna Jakab, Regional Director, WHO Regional Office for Europe. Hans Kluge, Special Representative of the Regional Director to Prevent and Combat M/XDR-TB in the WHO European Region and Director of the Division of Health Systems and Public Health
Annex 2

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