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

Copenhagen, Denmark, 12 November 2013
ABSTRACT

The Eighth Meeting of the European Technical Advisory Group on Tuberculosis Control was held in Copenhagen on 12 November 2013. The meeting: (i) reviewed the epidemiology of TB and multidrug-resistant TB in the WHO European Region and progress in implementing the recommendations of the seventh meeting of the Technical Advisory Group and in implementing the Consolidated Action Plan to Prevent and Combat Multi- and Extensively Drug-Resistant Tuberculosis (M/XDR-TB) in the WHO European Region, 2011–2015; (ii) received an update on the coordination initiatives and working groups established at regional level to facilitate the implementation of the Consolidated Action Plan; and (iii) discussed and proposed specific measures to improve the work of the Regional Office in the areas of laboratory work, risk factors and social determinants.

Keywords

INTEGRATED HEALTH CARE SYSTEMS
OUTPATIENT CARE
PUBLIC HEALTH
TUBERCULOSIS, EXTENSIVELY DRUG-RESISTANT
TUBERCULOSIS, MULTIDRUG-RESISTANT
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**Acronyms and abbreviations**

<table>
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<th>Acronym</th>
<th>Description</th>
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<tr>
<td>DOT</td>
<td>directly observed treatment</td>
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<td>MDR-TB</td>
<td>multidrug-resistant tuberculosis</td>
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<td>TB</td>
<td>tuberculosis</td>
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<tr>
<td>XDR-TB</td>
<td>extensively drug-resistant tuberculosis</td>
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Introduction

The Eighth Meeting of the European Technical Advisory Group on Tuberculosis Control was held in Copenhagen, Denmark, on 12 November 2013.

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 of and trends in the disease as well as the main achievements, constraints and trends in prevention and care;
- review the progress made in implementing the recommendations of the seventh meeting of the Technical Advisory Group held on 3 December 2012;
- review the progress made in implementing the Consolidated Action Plan to Prevent and Combat Multi- and Extensively Drug-Resistant Tuberculosis (M/XDR-TB) in the WHO European Region, 2011–2015;
- receive an update on the coordination initiatives and working groups established at regional level to facilitate the implementation of the Consolidated Action Plan;
- discuss and propose specific measures to improve the work of the Regional Office in the areas of laboratory work, risk factors and social determinants.

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 WHO and the Member States on the achievements made. However, the Group observes with concern the amount of and rising trends in M/XDR-TB in the Region and notes the need to continue efforts to improve the prevention, diagnosis and treatment of M/XDR-TB to achieve the targets set.

MDR-TB surveillance and control

The Technical Advisory Group congratulates the Regional Office for its work in improving the surveillance of TB and M/XDR-TB and the improvements in diagnosis and treatment of TB and M/XDR-TB. However, it observes with concern the very low level of laboratory-confirmed diagnoses and the continued poor M/XDR-TB treatment outcomes in many countries. This calls for continuing focused and intensified efforts to improve M/XDR-TB case detection and to ensure effective treatment at national levels. The Group recommends, therefore, that the Regional Office:

- conduct a systematic analysis of the reasons for the poor treatment outcomes for MDR-TB, stratified by drug susceptibility, and especially in high-priority countries, so as to recommend action to improve treatment outcomes;
continue to provide technical support to countries in increasing TB and M/XDR-TB case-detection rates, including to:

- improve laboratory services using the European TB Laboratory Initiative network;
- encourage and support the involvement of the community in the detection, treatment and care of TB through, for example, strengthened civil society organization in the area of TB;
- support intensive case-finding activities;
- continue to ensure the commitment of high-level decision-makers to the Consolidated Action Plan to Prevent and M/XDR-TB, 2011–2015;

continue to support advocacy activities targeting governments and national TB programmes to facilitate and finance patient-centred approaches with the support of members of the Regional Collaborating Committee on TB control and care;

collect and assemble evidence of preventive treatment of TB in the Region, particularly among children who are contacts of M/XDR-TB patients;

continue to encourage and support countries to move towards outpatient treatment/ambulatory care for TB patients, and to assist countries to develop and adapt policies for rational use of hospital care for TB and X/MDR-TB patients.

Social determinants of TB

The Technical Advisory Group recognizes the improvement made in the diagnosis and treatment of TB and M/XDR-TB through the DOTS and Stop TB strategies in the Region. The Group also recognizes that the considerable progress seen in clinical care of TB needs to be sustained. For further impact, the Group recommends that TB control efforts are expanded beyond TB programmes to address: (i) co-morbidities for TB such as diabetes and harmful use of alcohol, and (ii) the social and economic determinants of the disease, building on existing work in this area. The Group therefore recommends that the Regional Office:

- provide guidance and training to countries in implementing a patient-centred treatment approach, including ensuring that medical staff improve their communication skills and skills in providing psychological support to TB and M/XDR-TB patients;
- develop guidance materials for professional training modules to be implemented at national level addressing issues of stigma, vulnerable groups and the social and economic drivers of TB and M/XDR-TB;
- develop guidance on how national TB programmes can reach out and collaborate better with other health programmes, such as diabetes and HIV/AIDS programmes;
- review past and current interventions to address the economic and social determinants of TB and M/XDR-TB both in general populations and for specific vulnerable groups (such as homeless people, prisoners, under-nourished people and people who are HIV-positive) and identify evidence of a positive impact on the incidence, prevalence, treatment outcomes and cost of treatment of TB and M/XDR-TB, including, for example, the impact of:
  - free diagnosis and treatment for TB and M/XDR-TB and co-morbidities;
  - the targeting of TB and M/XDR-TB risk groups;
− the targeting of poor, remote and underserved areas;
− the use of incentives and enablers (cash, food packages, travel vouchers);
− collaboration with specialists/departments in the diagnosis, treatment and care of TB co-morbidities and adverse health behaviour (HIV, poor nutrition, smoking, diabetes and the abuse of alcohol and drug);
− collaboration by the ministry of health with prison authorities and other ministries involved in social and health care welfare;
− social mobilization and awareness campaigns;
− awareness campaigns among employers;

• based on the findings from the preceding recommendation, identify practices with a positive impact on TB and M/XDR-TB and recommend priority action for social interventions/action for discussion at the ninth meeting of the Group.

**Laboratory diagnosis**

The Technical Advisory Group recognizes the improvement in laboratory infrastructure in the Region and progress in strengthening laboratory diagnosis, including bacteriological and molecular confirmation of TB and M/XDR-TB. The Group also welcomes and supports the work involved in developing a diagnostic algorithm combining bacteriological and molecular tests. There is, however, still important and necessary work to be done in TB and M/XDR-TB case detection, and the Group recommends that the Regional Office:

- continue to stress the importance of M/XDR-TB case detection and the vital role of laboratory infrastructure in increasing bacteriological confirmation of TB-cases, and to promote second-line drug susceptibility testing in order to detect XDR- and pre-XDR-TB;
- continue to provide support to countries to strengthen and maintain their laboratory infrastructures so as to improve national diagnostic networks;
- work to ensure that the diagnostic algorithm is aligned with, and if possible adopt, international and European standards of TB diagnosis and care, and support its adaptation and implementation at national level;
- strengthen the evidence base of the diagnostic algorithm, including further specification of the possible combination of diagnostic tests and an evaluation of the cost-effectiveness of various combinations of tests;
- advise and encourage all Member States to identify formally a national reference laboratory with clearly formulated terms of reference and a budget.
Annex 1

PROGRAMME

SESSION 1: Introduction

09:00–09:15 Opening. Guenael Rodier, 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. Masoud Dara

SESSION 2: Report from last STAG-TB and TAG-TB meetings

09:30–09:45 Summary of the recommendations from the 13th Meeting of the Strategic and Technical Advisory Group for TB (STAG-TB), 11–12 June 2013, 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 Progress in the implementation of the recommendations from the 7th Meeting of TAG-TB, 3 December 2013, Copenhagen, Denmark. Masoud Dara

10:00–10:30 Discussion

SESSION 3: Updates on specific areas


11:00–11:30 Discussion

11:30–11:45 Mid-term progress report on implementation of Consolidated Action Plan to Prevent and Combat M/XDR-TB. Masoud Dara

11:45–12:15 Discussion

SESSION 4: Questions to TAG-TB

13:15–13:30 Addressing risk factors and social determinants of TB. Pierpaolo de Colombani, Medical Officer, TB and M/XDR-TB Programme

13:30–14:20 Discussion


14:40–15:30 Discussion

16:00–17:00 Main recommendations of the TAG-TB 8th Meeting. Chairperson

17:00–17:10 Closure of the meeting. Zsuzsanna Jakab, Regional Director, WHO Regional Office for Europe. Hans Kluge, Director, Health Systems and Public Health Division
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