

STOP TB NEWS

January 2010

New Year's message from Executive Secretary Dr Marcos Espinal

As 2010 begins, we are approaching an important watershed. This year is the halfway mark for the [Global Plan to Stop TB 2006-2015](#).

This is a moment to ask ourselves, How far have we come in our fight against TB?

We have sought to provide some answers to this question through the progress report we issued in November. [The Global Plan to Stop TB 2006-2015: Progress Report 2006-2008](#) finds that DOTS is available for 97% of the world's population. The Global Plan's treatment success milestone for 2008 of 83% has been surpassed. WHO reported in December that treatment success is now up to 87% worldwide.

Testing for drug resistance has increased almost threefold, and many countries have increased national collaborative activities to address HIV among people diagnosed with TB. Between 2005 and 2007 the percentage of TB patients tested for HIV in African countries with a high prevalence of HIV rose from 14% to 41%.

On the research front, nine vaccine candidates are in Phase I clinical trials, and by end-2008 three had entered Phase II trials. These are impressive gains, since the Plan calls for at least 20 vaccine candidates in Phase I trials by 2015. In diagnosis, new techniques have been introduced to referral laboratories that produce results in a few hours instead of weeks. On treatment, clinical trials by Stop TB partners on gatifloxacin and moxifloxacin may provide evidence for a shortened regimen for treating TB.

Despite these strides, many obstacles remain. The detection of new smear-positive TB cases has slowed, suggesting that the 2010 milestone of a 78% detection rate will not be achieved unless countries take rapid and innovative action and actively engage all sectors of society. The great majority of people with multidrug-resistant TB are still not receiving effective treatment; and countries have not made sufficient progress in screening HIV-positive people for TB or increasing the numbers of people on preventive therapy.

Research efforts need to accelerate to develop and evaluate tests to detect active TB at the first point of care; to develop a robust pipeline of new drug candidates; and to reach the goal of a new vaccine by 2015.

Funding remains the most serious challenge. From 2006-2008, the financing needs for funding TB control worldwide was short by US\$ 1 billion per year. The gap for research and development was approximately US\$ 0.5 billion for 2007.

The greatest hope for fulfilling the goals of the Global Plan lies in the growing strength of the Partnership. The number of partners in Stop TB grew from 463 in 2005 to more than 1000 in December 2009. And 2009 saw the launch of six new national partnerships—in Afghanistan, the Dominican Republic, Morocco, Nigeria, Swaziland and Syria.

Some 1300 people demonstrated their commitment to Stop TB through their attendance at the [3rd Stop TB Partners' Forum](#) in Rio de Janeiro in March. Their vigorous and enthusiastic efforts at the forum engendered the [Rio Recommendations](#)—which will give guidance to the Coordinating Board,

Working Groups, Constituencies, Secretariat and other partnership bodies on actions required to address the concerns and priorities of Stop TB Partners for the next five years.

As we step boldly into 2010, I wish to congratulate partners and other friends for their achievements and thank them for their tireless efforts and dedication to stopping TB. We hope you will start the New Year refreshed and ready to continue the long fight we face to achieve a world free of TB.

TOP LINE NEWS

World TB Day 2010 campaign will highlight innovations in the global fight against TB

The 2010-2011 World TB Day campaign, **On the move against tuberculosis: Innovate to accelerate action**, was launched in December at the opening ceremony of the [World Conference on Lung Health of the International Union Against Tuberculosis and Lung Disease](#).

"We have made considerable progress. But the evidence points to an urgent need to do more, do it better and do it faster," said Dr Marcos Espinal, Executive Secretary of the Stop TB Partnership

"The year 2010 marks the halfway point for the Global Plan to Stop TB. It is clearer than ever that we will not achieve our targets unless we find new and innovative ways to stop TB—including stepped up research to find new drugs, diagnostic techniques and a new vaccine; and new approaches to helping people access effective TB treatment," said Dr Mario Raviglione, Director of the Stop TB Department of the World Health Organization.

World TB Day is held each year on 24 March.

[Link to the press release](#)

[Link to the World TB Day web site](#)

Independent charity evaluator gives Stop TB Partnership top rating

[GiveWell](#) has named the Stop TB Partnership one of the world's two most worthy recipients of charitable donations. GiveWell (www.givewell.net) is an independent charity evaluator currently focused on international aid. The group started as a group of donors looking to accomplish as much as possible with their own giving; since launching in mid-2007, they have published research on both U.S. and international causes and been featured in the New York Times, the Wall Street Journal and a book by Peter Singer (see <http://www.givewell.net/press>).

GiveWell ranks organizations according to four criteria. First, they must be proven, meaning they can and do demonstrate their impact in terms of lives changed. Second, they must be cost-effective--meaning they change many lives (significantly) for relatively little money. Third, they must be scalable, or able to use more funds productively. And finally, they must be transparent.

Individuals can give funds to the Stop TB Partnership through a [UN Foundation donation portal](#). The [UN Foundation](#), a public charity, is an advocate for the UN and a platform for connecting people, ideas and resources to help the United Nations solve global problems. Funds contributed through the UN Foundation go towards the provision of TB drugs to countries in need through the [Global Drug Facility](#). Donations to the Partnership can also be made through the [Stop TB Trust Fund](#).

To read more about GiveWell's assessment of the Stop TB Partnership, read the [GiveWell blog entry](#) from 31 December 2009.

UN Special Envoy visits Africa, challenges countries to tackle tuberculosis

The United Nations Secretary General's Special Envoy to Stop Tuberculosis visited Ethiopia and Kenya for five days in December on a mission organized by the Stop TB Partnership in close collaboration with [UNAIDS](#).

Dr. Sampaio asked key stakeholders including governments to take an active role in helping people in need to gain access to accurate TB diagnosis and effective treatment. He also reiterated his request to ministers of health in Africa to set ambitious national targets and mobilize the funding

necessary to reduce the number of people living with HIV who die unnecessarily of TB. He made the initial request at a Special Ministerial Session on TB in Kigali, Rwanda in September.

Dr Sampaio's visit to Kenya was timed to coincide with World AIDS Day (1 December). In Nairobi, an educational workshop for schoolchildren focused on various aspects of TB and HIV, including their prevention and treatment. Mr Wilfried Lemke—the UN Secretary-General's Special Adviser on Sports, Development, and Peace—joined Dr Sampaio at a football tournament for boys and girls aged 12 to 14.

In Addis Ababa, Dr Sampaio met with Ato Girma Woldegiorgis, President of the Federal Democratic Republic of Ethiopia; Dr Tedros Adhanom, Minister of Health; and Mr Jean Ping, Chairperson of the African Union Commission. Discussions focussed mainly on TB control in Ethiopia and Africa overall, integration of HIV and TB services and strengthening laboratory services and health systems. Dr Sampaio also visited two TB/HIV health facilities: St. Peter Hospital and Bole Health Center.

[Link to the press release](#)

NEWS

36 million people with tuberculosis cured and up to 8 million lives saved through 15 years of DOTS programmes

New data, released in early December by WHO, indicate that some 36 million people have been cured of tuberculosis over the past 15 years through DOTS programmes, with up to 8 million TB deaths averted through this approach.

Since the launch of DOTS—now confirmed as the most cost-effective approach in the fight against tuberculosis—the number of people being cured has increased regularly. Data from the latest 12-month period now show that the highest ever number of infectious patients—2.3 million people—were cured. With 87% of treated patients being cured, the 85% global target was exceeded for the first time since it was established in 1991. Furthermore, a total of 53 countries surpassed this treatment milestone.

The WHO update shows continued progress on addressing the lethal combination of TB and HIV. Between 2007 and 2008, 1.4 million TB patients were tested for HIV, an increase of 200 000. Of those who tested HIV positive, one-third benefited from life-saving HIV anti-retroviral therapy (ART) and two-thirds were enrolled on co-trimoxazole prophylaxis to prevent the risk of fatal bacterial infections. In addition, screening for tuberculosis and access to isoniazid preventive therapy for TB among people living with HIV more than doubled, although the total number is still far short of what it should be.

Although more and more patients are being cured, there are millions who are being let down because they are unable to access high-quality care. In 2008, 1.8 million people died from TB including half a million deaths associated with HIV—many of them because they were not enrolled on ART.

[Link to the report](#)

Countries' TB proposals have unprecedented success in Global Fund Round 9

In November, [The Global Fund to Fight AIDS, Tuberculosis and Malaria's](#) Board of Directors approved 34 tuberculosis proposals in Round 9, with the highest level of funding to date—up to US\$ 1.5 billion over five years—for TB.

This round provides one-third more funding for TB than did Round 8. TB proposals had a success rate of 61%, compared to 47% for HIV proposals and 55% for malaria.

WHO and seven other Stop TB Partners supported all but three countries for the application process, and this support was coordinated by [TBTEAM](#), which also developed planning tools used by virtually all applicants. There was a special focus on addressing weaknesses in previous TB proposals, particularly poor description of linkages between all components of the Stop TB Strategy and budget requests.

Round 9 will provide for three times as much funding for drug-resistant TB as the previous round. The funding will support measures including securing adequate laboratory facilities and infection-control measures and prevention of further emergence of drug resistance by ensuring that the essential elements of DOTS are in place.

Overall for this Round, the Board made a two-year commitment of US\$2.4 billion for all three diseases, and in principle approximately US\$ 7 billion over five years. The next round of grants will be launched in May 2010. This tenth round of funding will be considered for approval at a Board meeting to be held some time between November 2010 and January 2011.

[Read the Global Fund press release](#)

New report finds government funding for TB research is outstripped by philanthropic grants

A new report released in December shows that lack of funding is the main obstacle to progress on developing a highly sensitive quick blood or urine test for active TB disease, new drugs and an effective vaccine. The [2009 Report on Tuberculosis Research Funding Trends 2005-2008](#), produced by the [Treatment Action Group](#) (TAG), an HIV and TB advocacy think tank, and the Stop TB Partnership, finds that research funding for tuberculosis increased just 7% between 2007 and 2008.

The report makes note of an unexpected trend. In 2008, for the first time since TAG began reporting on TB research funding, philanthropic grants outstripped government funding for TB research. A single foundation—the [Bill & Melinda Gates Foundation](#)—donated more funds for TB research in 2008 than all public agencies combined, including the [US National Institute of Allergy and Infectious Diseases](#) at the National Institutes of Health, whose overall research funding flattened.

Global investment in TB research and development has decelerated rather than grown in the three years since the [Global Plan to Stop TB: 2006-2015](#) was issued. Between 2006 and 2007 investment rose by US\$ 56 million—to a total of US\$ 474 million. However between 2007 and 2008 investment rose by just US\$ 36 million, to US\$ 510 million.

Scientists at the pinnacle of the research world acknowledge publicly that TB has been neglected. In [a commentary on msnbc.com](#) last month, Dr Anthony Fauci, director of the US National Institute of Allergy and Infectious Diseases, wrote: "It's time to bring TB research into the 21st century. For the past 60 years we have treated tuberculosis patients with essentially the same therapeutic regimens. The only licensed vaccine against TB, the BCG vaccine, is more than 100 years old and does not prevent adult pulmonary (lung) TB, the most common and infectious form of the disease. Diagnostics for TB are antiquated, non-standardized, and imprecise ... Where is the outrage over such meager progress?"

[Read the press release](#)

[Read the report](#)

2010: Year of the Lung

The Forum of International Respiratory Societies has declared 2010 as the Year of the Lung.

The 2010: The Year of the Lung campaign will be an intensive, global, 12-month campaign spearheaded by seven major respiratory societies and aimed at galvanizing health officials and civil society behind one common purpose: to express the urgency for increased awareness and action to promote lung health to all levels of society.

[Link to the Year of the Lung website](#)

Lilly Transfers Capastat® License and Trademark to VIANEX S.A.

In October, [Eli Lilly and Company](#) (NYSE: LLY) and Greece-based [VIANEX S.A.](#) announced an agreement in which Lilly will transfer its Spanish license and trademark for Capastat® Sulfate (capreomycin for injection, USP) to VIANEX. VIANEX will also acquire Lilly's rights to manufacture, market and distribute Capastat—one of two Lilly medicines used to treat multidrug-resistant TB—in Europe. VIANEX expects to launch the product by the end of 2010.

Through its [Lilly MDR-TB Partnership](#), Lilly is transferring the manufacturing technology for its two MDR-TB medicines to manufacturers who either operate in some of the countries hardest-hit by MDR-TB, or offer unique capabilities to help ensure availability of these medicines at lower costs. VIANEX will work with international organizations to ensure supply of the medicine globally.

[More information](#)

NEWS FROM STOP TB'S WORKING GROUPS

Cataloguing TB knockouts and mutants

Investigators are being asked to submit information regarding published or unpublished TB knockout and mutant strains they have generated in their laboratories using a simple, easy-to-fill-out online form on the [TubercuList website](#). This information will be publicly accessible and of great benefit to the entire research community, increasing communication and collaboration within the field.

The form is accessible directly from the TubercuList home page (under the "TB Mutants" tab on the top right) and the information will be displayed in the "mutant" box on gene-specific pages.

This initiative was developed and launched by TubercuList, [NIAID/NIH](#), the [Bill & Melinda Gates Foundation](#) and the [Stop TB Partnership Working Group on New TB Drugs](#).

New website for Working Group on New TB Drugs

The Stop TB Partnership Working Group on New TB Drugs (WGND) has launched a new website at www.newtbdrugs.org. The website contains important news items from the WGND, as well as meeting announcements, key documents, a list of working group members and a dynamic, online TB drugs pipeline. Under development is a blog on TB R&D, which will contain news and blog postings from the broader TB research community.

Publication: Pathways to Better Diagnostics for Tuberculosis

In December, the [Stop TB Partnership's New Diagnostics Working Group](#) released a new publication entitled **Pathways to Better Diagnostics for Tuberculosis: A blueprint for the development of TB diagnostics**.

This publication, with contributions from more than 30 experts, aims to provide a comprehensive, well-referenced blueprint to guide researchers, clinicians, industry partners, academics and people working in TB control in all aspects of TB diagnostics development, from concept to evaluation, implementation, scale-up, delivery and impact.

The document is open access and can be distributed freely and posted on websites and newsletters.

[Download the publication](#)

NEWS ON AWARDS AND GRANTS

Launch of the 3rd round of the Stop TB Challenge Facility for Civil Society

The Stop TB Partnership has launched the call for proposals for the third round of the [Challenge Facility for Civil Society](#), with a deadline of 10 February 2010.

This round will provide much needed funds (US\$ 5000–US\$ 20 000) to community-based civil society organizations whose work focuses on advocacy and social mobilization activities in countries affected by TB. It aims to make the voices of vulnerable communities affected by tuberculosis heard by local policy makers. In addition, grantees help find and refer potential TB cases in the community to health centres for TB testing and support patients to continue treatment.

Thanks to donors and partners, the Challenge Facility can continue supporting civil society activities designed to attract greater attention from governments and the general public to TB prevention, treatment and control. Applications focusing on raising awareness and empowering communities to become part of the solution in the fight against TB are welcome.

Stop TB award winners for 2009 announced in Cancún

The Stop TB Partnership announced its 2009 award winners at the [World Conference of the International Union Against Tuberculosis and Lung Disease](#), held in Cancún, Mexico in December.

International advocate Lucy Chesire and leading researcher Professor Stewart Cole share the 2009 [Kochon Prize](#), which is awarded annually to persons, institutions or organizations that have made a highly significant contribution to combating tuberculosis. The winners each received the Kochon Medal and will divide the US\$ 65 000 in prize money. The award is supported by the Kochon Foundation.

The [Stop TB Award for Excellence in Reporting on Tuberculosis](#) recognizes outstanding reporting and commentary in print and on the web that materially increases the public's knowledge and understanding of TB and multidrug-resistant TB in countries affected by the disease. The 2009 award was won by Charles Mpaka of Malawi with his article, [A woman's face in tuberculosis](#); he will receive an award of US\$ 3000. Second place, with an award of US\$ 2000, went to Carlos Henrique Fioravanti of Brazil for his article [Mortal Drama](#), and third place (US\$ 1000) went to Neway Tsegaye of Ethiopia, for his article [TB Awareness and Treatment Challenges](#).

David Rochkind won the [Images to Stop Tuberculosis Award](#), which seeks to obtain outstanding photos depicting tuberculosis prevention and treatment as well as community awareness-raising activities. Rochkind, whose winning portfolio depicts the daily tragedies caused by tuberculosis among gold miners in South Africa, will receive a grant of US\$ 5000 to produce a photo essay on tuberculosis and US\$ 5000 in prize money.

The journalism and photography awards are both supported by the Lilly MDR-TB Partnership. South African media personality and TB advocate Gerry Elsdon emceed the awards ceremony.

[Kochon Prize: Note to the media](#)

[Award for Excellence in Reporting: Note to the media](#)

[Images to Stop TB Award: Note to the media](#)

Thomé Villar Award

In November, a group of researchers at the [Porto University Faculty of Medicine](#), led by Professor José Torres da Costa, won the Portuguese Pneumology Society's [2009 Thomé Villar/Boehringer Ingelheim Award](#) for their work on the Portuguese Health-Care Worker Study.

[Read more \(in Portuguese\)](#)

Lilly MDR-TB Partnership wins XIII Codespa Award

In December, the [Lilly MDR-TB Partnership](#) won the XIII Codespa Award for outstanding achievements in uplifting communities in developing countries. The award is given annually by the [Codespa Foundation](#), which is headed by His Royal Highness Prince Felipe, Prince of Asturias.

[More information \(in Spanish\)](#)

TB PEOPLE

TB community mourns the loss of research pioneer Sir John Crofton

Sir John Crofton passed away peacefully at his home in Edinburgh, Scotland on 3 November. He was 97.

Widely considered one of the world's pre-eminent physicians, Sir John was responsible for breakthrough research that led to the first effective combined treatment regimen for TB.

Sir John's work, together with that of the Union and other scientists, laid the groundwork for subsequent development of the DOTS strategy for TB, which formed the basis for WHO's current Stop TB Strategy.

Sir John was professor of respiratory diseases and tuberculosis at the University of Edinburgh for 25 years. He was vice principal between 1969 and 1971 and retired from the university in 1977, the same year he was knighted for his work. He also served as President of the Royal College of Physicians.

After leaving the university he began a second career as an anti-tobacco crusader, speaking widely on the health impacts of tobacco in the developing world and travelling extensively across Asia. Well into his nineties he continued to campaign tirelessly for TB and tobacco control.

Pakistan appoints Stop TB Ambassador

Actor Behroz Sabzwari recently committed to using his popularity to raise awareness about tuberculosis in Pakistan. He has already appeared in television commercials highlighting the importance of DOTS and the availability of free medicines, and will represent Pakistan at different Stop TB activities at the national and international levels.

Luís Figo launches Italian TB comic book in Rome

International football star and Stop TB Ambassador Luís Figo launched the Italian-language version of the educational comic book *Luís Figo and the World Tuberculosis Cup* at the Pistelli Primary School in Rome in October. As part of the event, Figo read the comic book aloud to a group of students and answered their questions about tuberculosis. Later he and the students kicked a ball around the school's pitch.

A group of 9- to 11-year-old students at the school also presented Figo with a poster campaign they created to raise awareness about tuberculosis. The campaign was developed in the run-up to the comic book launch, during which time they participated in special classes about tuberculosis.

The event was organized by [Stop TB Italia](#) with the support of the [Lilly MDR-TB Partnership](#) and under the auspices of the Province and of Municipality of Rome.

COUNTRY NEWS

Stop TB National Partnership launched in Morocco

Partners in Morocco came together in October to unveil the Moroccan Stop TB national partnership, which will be run by a secretariat with a forum including all stakeholders.

Ms Yasmina Badou, Health Minister of Morocco and Stop TB Ambassador Anna Cataldi announced the fledgling partnership's launch at the closing of a two-day conference on tuberculosis care attended by some 300 delegates. They also presented its charter, which was endorsed by the delegates and has now been released with a call for broad adoption by national institutions, civil society, professional unions and the media.

Morocco has a strong history of commitment to stopping tuberculosis. In 1991, it was one of the first countries in the world, and the first country in the Eastern Mediterranean Region, to start a DOTS program. By 1995 Morocco had already achieved more than 90% case detection and cure rates. Since 1995 the incidence rate (percentage of people in the country who become ill with the disease) has been declining at a rate of 3% per year.

Nonetheless, tuberculosis remains a serious public health problem in Morocco, with an estimated 26 000–27 000 new cases each year. Most cases occur among people aged 15 to 45 in large cities and other urbanized, heavily populated areas. To reach the 2050 target of elimination of TB as a public health problem, the country will need an even more ambitious agenda, and the establishment of the new national partnership is an important step in that direction.

New TB brand for public- and private-sector TB partners in Pakistan

In order to create uniformity in TB communications and services throughout the country and to minimize duplication and clutter of TB messages, Pakistan's National TB Control Programme has launched a new brand: Together *Hai Jeet Zindagi Ki* (Life Wins). The brand will be used by more than 5 000 public- and private-sector tuberculosis diagnostic and treatment centres all over the country.

The brand name ("Together") and the tag line ("*Hai Jeet Zindagi Ki*") surround a flower with eight petals signifying the 8-month DOTS treatment process. The petals' colour shifts from gray to green, representing the recovery process, and therefore hope.

The National TB Control Programme and Global Fund partners envisage that the promotion of both the public and private sectors in the urban, semi-urban and rural areas of Pakistan will contribute to the retention of TB clients at the desired health service delivery levels.

Botswana: Video drama aims to Stop TB

The [Kuru Family of Organizations](#) Community Health Communications Centre launched a locally produced drama on World Aids Day (1 December) in D'Kar, Botswana. *Komsana* ("Listen") -- a 43-minute educational drama on DVD, in Setswana with English subtitles—is designed to encourage rural communities to adhere to TB treatment and promote positive patient-provider relations.

Komsana aims to help everyone understand the challenges faced by TB patients in everyday life, such as the negative effects of alcohol, not being able to accept one's illness, and pressure from those with misconceptions about TB treatment. The project targets rural communities that have limited access to relevant health communication materials.

The drama was launched with partners from the Ministry of Health National TB Programme, Ghanzi District Health Team and [Sida](#). Ghanzi district has the highest TB rate in Botswana, with numerous isolated populations.

Zimbabwe activities focus on culture of accountability

Operating on the principle that a community and its health services share responsibility for individual and public health, the [Community-based Early Tuberculosis Diagnosis Initiative and Consultancy](#)—a non-profit organization based in Zimbabwe—held a range of events during the last quarter of 2009.

In October, two communication workshops were conducted for health care providers, reviewing topics including infection control, specimen collection, hospital- and home-based care, and the importance of referral and follow-up for patients showing symptoms of TB.

A two-day workshop for public service general workers at the Elangeni Public Service Training Institute—including directors, managers, chefs and general hands—was very well received, having addressed social mobilization and the integration of TB and HIV control into the workplace.

The organizers also seek to boost political commitment, and held a meeting with the Bulawayo City Councillors on 15 October. A memorandum of understanding was signed and the initiative now gives short talks on TB at city ward meetings.

In early December they led a public education awareness campaign in Bulwayo's Ward 15, and gave a talk to Zimbabwe Institute of Medical Doctors Association on the rationale for integrating pro-poor and equity-enhancing measures in TB control.

Patient Helping Fund of Kuwait supports TB care in Afghanistan, Somalia, Yemen and Djibouti

The Patient Helping Fund, an NGO in Kuwait, is supporting national TB programmes in Somalia, Djibouti and Yemen with anti-TB medicines. The Somali programme has already received the medicine, while the fund has signed an agreement with the [Global Drug Facility](#) to purchase first-line anti-TB medicines for Djibouti and Yemen. This is the second round of collaboration between Kuwait, the GDF and the WHO Eastern Mediterranean regional office to take place in recent months. The fund has also expressed willingness to finance costly MDR-TB medicines.

Using village-level folk plays to communicate TB messages in Bihar, India

Village-level folk plays (*nukkad natak*) are being used to communicate tuberculosis-related messages in remote areas of the Indian state of Bihar, where case detection is low and the treatment default rate is high.

[ADRA-INDIA](#), with financial support from [USAID-India](#) and [World Vision-India](#) and in collaboration with the State TB Control Society, District TB Control societies and the National Rural Health Mission, has organized a series of 36 folk plays in local dialects in eight districts of Bihar.

The shows targeted the most vulnerable and underserved local groups, including ethnic and religious minorities, and helped to close knowledge and information gaps and foster greater community involvement by informing audiences about how TB spreads, the importance of DOTS treatment and the rights and responsibilities of TB patients.

The local community-based organizations that are ADRA-INDIA's Advocacy, Communication and Social Mobilization Project partners played a vital role in the initiative.

TB on the agenda at Global Festa Japan 2009

[RESULTS Japan](#) attended the [Global Festa Japan 2009](#) in Tokyo in October, handing out Stop TB pamphlets, letters and flyers and gathering signatures for a petition to new government ministers.

More than 96 000 people attended the two-day event.

TB awareness campaign launched in Moldova

In October, Moldovan NGO Speranta Terrei kicked off a TB awareness campaign in the northern city of Balti (pop. 128 000). The campaign was built around the image and messages of Stop TB Partnership Ambassador Luís Figo and included the launch of the comic book [Luis Figo and the World Tuberculosis Cup](#), which was distributed to schoolchildren along with other TB awareness materials.

At the launch event on 9 October, volunteers from Balti Medical College re-enacted the battle between Figo's team of teens and the team of TB germs that takes place in the comic book. A [public service announcement](#) on TB, featuring Figo, was also screened for the audience in its Russian-language version. Mayor Vasiliu Panciuc of Balti, Dr Feodora Rodiucova of Speranta Terrei, and Dr. Silviu Ciobanu of WHO's country office opened the event with remarks on combating TB and using Figo comics to communicate with school children. Igori Istratii, vice-captain of the football club "Locomotiv" in Balti, told the gathering about Figo's life and his football prowess. He said he would share Figo's TB messages with his team members.

The campaign was covered by local and international broadcast media and was extended to the Moldovan cities of Chisinau, Orhei and Ungheni.

Regional Training Centre for TB Control to open in Tbilisi, Georgia

The Tbilisi Regional Training Centre for TB Control will open in Tbilisi, Georgia on 26 January, in collaboration with the [KNCV TB Foundation](#). The centre will strengthen human resources capacity in Eastern Europe and Central Asia to accelerate the implementation of the Stop TB Strategy.

TB-HIV programme in Myanmar receives US\$ 4 million for 2010-2014

A integrated TB-HIV care project launched as a five-year pilot in 2005 by [The Union](#) and [Myanmar's Ministry of Health](#) with funding from the [Yadana Consortium](#) will now continue through 2014, thanks to an additional commitment of US\$ 4 million from the consortium, operated by Total E&P Myanmar.

The funding will provide antiretroviral therapy for 2000 patients over the next five years.

The Integrated HIV Care for TB Patients Living with HIV/AIDS Programme is a pioneer collaboration between the public health sector, an international non-governmental organization and the private sector in Myanmar. It reaches approximately 1.5 million people, providing comprehensive and integrated HIV care, including antiretroviral therapy, to TB patients co-infected with HIV, as well as their HIV-positive relatives. The coalition of stakeholders involved in the programme includes the national TB and AIDS programmes, township health centres, hospitals, laboratories, social workers, self-help groups and people living with HIV.

In 2008, the Global Business Coalition on AIDS, TB and Malaria honoured the programme, saying it "excels in its multi-sector approach, full integration of HIV and TB and focus on long-term sustainability through local capacity building".

[Read the press release](#)

RESEARCH NEWS

Tuberculosis: On the path to prevention

Researchers at the [McGill University Health Centre](#) in Montreal, Canada and their international colleagues have identified the first genetic resistance factor against tuberculosis infection.

In findings published in the [Journal of Experimental Medicine](#), Dr Erwin Schurr and his team at the Research Institute from the McGill University Health Centre, in collaboration with Dr Alexandre Alcais, from the [Institut national de la santé et de la recherche médicale \(INSERM\)](#) in Paris, France, have shown that one or multiple genes might provide certain people with resistance to tuberculosis infection.

The hope is that these genetic resistance factors can be used in the near future to prevent TB infection in the general population by stimulating the mechanism responsible for resistance.

[Click here](#) for more information, including a press release, the original article and a short audio interview.

New laboratory initiative launched by Netherlands-based partners

On the occasion of the [Global Laboratory Initiative](#) meeting on 15 October in Annecy, France, the [Royal Tropical Institute](#), [KNCV Tuberculosis Foundation](#) and the [National Institute for Public Health and the Environment](#) together launched a new initiative, the [Dutch TB Laboratory partnership](#).

The initiative, called DTLab for short, aims to draw on the three partners' long experience to coordinate and improve the quality and effectiveness of TB laboratory diagnostic services around the world

DTLab will support a variety of TB laboratory services in the field, while ensuring they are evidence-based, thoroughly adapted to local needs and designed to maintain and enhance local ownership and sustainability.

Florida State University researchers receive NIH grant for basic research on TB drugs

In October, a Florida State University research team received a grant of US\$ 3.1 million from the [National Institutes of Health](#) to screen small molecules that could be potential targets for TB drugs. The funds are part of a larger NIH grant of US\$ 9 million awarded to a group of collaborating institutions that also includes the University of Alabama; the Burnham Institute; the University of California, San Diego; and Harvard University. Dr Timothy A. Cross, the Earl Frieden Professor of Chemistry and Biochemistry at Florida State, leads the project.

Cross and his colleagues have been studying TB for about seven years; most of which have been spent building up their technology and methodology. In the next five years, researchers may be able to isolate 5–10 potential drug targets using nuclear magnetic resonance techniques, which provide scientists with intimate portraits of a protein's structure and clues to its function.

[Read more](#)

RECENT EVENTS

Spanish event confirms commitment to the global fight against TB

Spanish parliamentarians, members of the scientific community and civil society gathered in Madrid in November for a debate organized by [Planeta Salud](#) and the Stop TB Partnership.

Dr Marcos Espinal, Executive Secretary of Stop TB Partnership, opened the session with Spanish Secretary of State for International Cooperation Soraya Rodríguez and thanked the Spanish government for its steady leadership in global health, specifically in relation to its role in tuberculosis control. He went on to brief participants on the global TB situation and the needed response.

Secretary Rodríguez announced that the Government of Spain would continue funding the global fight against TB in line with the country's strategic plan for the period from 2009 to 2012. She made special note of the importance of TB research and development, which she called "a priority that strengthens health systems."

Celebrating Chopin: A musical statement on TB

The *Association pour la Promotion de la Musique Classique's* 4th [New Year Music Festival](#), held 29 December–3 January in the Swiss Alps, dedicated a special concert to the Polish-born composer Frédéric Chopin, who died of TB in Paris in October 1849. On New Year's Day, in anticipation of the bi-centenary celebrations of Chopin's birth in March 1810, his first concerto (1830) was performed in its original arrangement in Rougemont Church, lit by candles for a warm, historical atmosphere.

"We wanted to mark the start of Chopin's bi-centenary by remembering his life as well as his music, and also to reach out to those who are faced with TB today" said Artistic Director Princess Caroline Murat. "We have linked up with the TB PhotoVoice Project, which provides cameras to TB affected community members who take photographs that help them identify and improve their communities. Evidently, we focus on the music while the Project focuses on the visual side of the challenge."

Other concerts during the festival featured music by Chopin, and the Association has planned a number of events for 2010 in which his life and his health will be considered alongside his music.

Monitoring and evaluation workshops strengthen country capacity

Two monitoring and evaluation workshops (English and French) for countries where [UNDP](#) is Principal Recipient of [Global Fund](#) grants were held in Geneva from 30 September - 7 October. Their goal was to strengthen the capacity of countries to best utilize the Global Fund's performance-based funding system. More specifically, the workshops focused on the Global Fund's monitoring and evaluation principles and requirement, monitoring and evaluation tools, and harmonization and

alignment to national plans. Participants included UNDP Global Fund project-related staff and national monitoring and evaluation counterparts from 24 countries.

Country teams identified three priority areas to be strengthened and developed a one-year, time-bound, results-based, country-specific follow-up plan by disease for monitoring and evaluation systems strengthening. Each country delegation also set one target to be reached in six months. UNDP will follow up on progress.

Multi-country TB management training course in Cairo

A month-long course on TB programme management was held in Cairo in November and attended by participants from Afghanistan, Djibouti, Egypt, Jordan, Sudan, Oman and Pakistan. The course was jointly facilitated by Egypt's National TB Programme and WHO's Eastern Mediterranean regional office, and sponsored by the [Japan International Cooperation Agency](#). Jordan's National Stop TB Ambassador Rania Ismail attended the closing ceremony.

RECENT PUBLICATIONS/MULTIMEDIA/WEB

Treatment of TB Guidelines – 4th Edition

The WHO's latest TB treatment guidelines (WHO/HTM/TB/2009.420) are now available for [download](#) as a PDF file. The print version will be available soon.

International Standards for Tuberculosis Care 2nd Edition (2009)

The [International Standards for Tuberculosis Care \(ISTC\) 2nd Edition \(2009\)](#) and the accompanying ISTC TB Training Modules were released in December at the [World Conference on Lung Health of the International Union Against Tuberculosis and Lung Disease](#) in Cancún, Mexico.

The ISTC is intended to facilitate the effective engagement of all care providers in delivering high quality care for patients of all ages, including those with sputum smear-positive, sputum smear-negative and extra-pulmonary tuberculosis, tuberculosis caused by drug-resistant *Mycobacterium tuberculosis* complex (*M. tuberculosis*) organisms, and tuberculosis combined with HIV infection and other co-morbidities.

The first edition of the ISTC was launched in 2006. Because of changes in epidemiology and available technology, the ISTC was revised for this second edition and contains key changes in all major areas of the document. In part, these changes were made to be consistent with revisions of WHO recommendations and new guidelines. The accompanying ISTC TB Training Modules include thirteen teaching slide sets covering a full range of tuberculosis topics that have been updated and expanded to complement the ISTC 2nd Edition.

As with the first edition, the second edition of the ISTC was developed by the [Tuberculosis Coalition for Technical Assistance \(TBCTA\)](#) with funding from [USAID](#), and was a result of an inclusive process guided by a steering committee that included individuals who represent a wide variety of relevant perspectives on tuberculosis care and control. Production of the ISTC materials was coordinated by the [American Thoracic Society](#) with assistance from the [Francis J. Curry National Tuberculosis Center](#) at the University of California, San Francisco.

Technical assistance for the utilization of the ISTC may be obtained through the TBCTA, its individual partners, and/or the PPM Subgroup secretariat. For further information contact: Philip Hopewell, MD at phopewell@medsfgh.ucsf.edu or Mukund Uplekar, MD at uplekarm@who.int.

2009 Pacific Health Summit: Report, video clips, photos and surveys now available

The [2009 Pacific Health Summit Report](#) has been released, summarizing the challenges, innovative ideas, and partnerships discussed in Seattle last June.

Select [video clips](#) are also available, offering a glimpse of the dynamic Summit plenary sessions, as are [photos](#) and [news articles](#).

Participants are invited to fill in a brief, online [Summit survey](#). To refer back to the program, visit [2009 Summit Agenda](#).

Comments on the outcome of the summit should be sent to Karuna Luthra at kluthra@nbr.org.

"Empowering Communities for TB Advocacy"

"Empowering Communities for TB Advocacy: The TAG-ICW Model" documents the partnership of [Treatment Action Group](#) and the [International Community of Women Living with HIV- East Africa](#) in building HIV activists' capacity to incorporate tuberculosis into their advocacy efforts.

[Download the publication](#)

UPCOMING COURSES/WORKSHOPS

Wolfheze Workshops, May-June 2010, The Hague

The Wolfheze Workshops will be held in The Hague, The Netherlands from 31 May to 4 June 2010, organized by [KNCV Tuberculosis Foundation](#) and the [World Health Organization Regional Office for Europe](#) in conjunction with the NTP managers' meeting of the WHO European Region.

The workshops aim to present the latest evidence for development of effective TB control policies, and to exchange experiences in implementation of efficient TB control strategies. The overarching theme for this year will be the follow-up of the WHO European Ministerial Forum "All Against Tuberculosis".

Individual invitations, registration forms and programmes will be sent at a later stage to confirmed participants. Registration is free of charge; accommodation (including full board) will cost approximately €195 per day. Due to financial limitations, participants are encouraged to use their own resources or approach their donors.

Contact: [Rob Broekstra](#)

EVENTS CALENDAR

March 2010

3 March	IGRA Echo Symposium	Birmingham, UK	Info
11–13 March	International Union Against Tuberculosis and Lung Disease 14 th Annual North American Region Meeting	Orlando, USA	Info
25–26 March	7 th TB Conference– Stop Tuberculosis: Yes We Can	Edmonton, Canada	Info

May 2010

14–19 May	American Thoracic Society International Conference	New Orleans, USA	Info
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May-June 2010

31 May–4 June	Wolfheze Workshops	The Hague	
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