

Eyes and ears

TB control to strengthen health systems

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An article from the HDN Key Correspondent Team

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Speakers at a session held during the 38th Union World Conference on Lung Health in Cape Town on Saturday explored the role tuberculosis (TB) control could play in bolstering health systems worldwide.

Global drug treatment targets and the TB-related targets included in the United Nations' Millennium Development Goals will not be met until health systems are strengthened, according to Diana Weil of the World Health Organization (WHO) Stop TB Department.

Weil said that national TB control programmes need better tools to improve health-care systems, optimize the use of shared resources and expertise and adopt system innovations.

She also said that organizations working to prevent and treat TB should look for better ways to engage with organizations such as the Global Fund to Fight AIDS, Tuberculosis and Malaria, the International Health Partnership, the Global Health Workforce Alliance and the Health Metrics Network.

Also during the session, Knut Lonroth, also of WHO's Stop TB Department, examined elements of the Stop TB Strategy and directly observed treatment – short course (DOTS) programme that could help improve health infrastructures.

According to Lonroth, one of the goals of the Stop TB Strategy is to strengthen health systems, and DOTS programmes focus on such efforts. But the health-infrastructure components of DOTS are undermined by certain conditions, such as possible competition for existing resources and a lack of coordination in training for health-care workers, Lonroth added.

Lee Richardson, a Canadian MP said that new investment was needed to support the fight against TB.

"We cannot escape the role of increased investment in the fight against TB as current drugs are old, and new diagnostic tools are needed . . . Investment because we are being confronted by [multi-drug resistant and extensively drug resistant TB] on a significant scale in the developed world," he said.

In developing countries such as Zimbabwe, the prevalence of HIV has undermined the government's response to TB in several ways. According to Zimbabwe's Minister of Health and Child Welfare, David Parirenyatwa, not enough has been done to tackle the growing threat.

"I have to admit, as a government, we have not done enough to address the issue of tuberculosis, and this is something that I have stated publicly," he said during an interview with Partners Zimbabwe. "The focus on HIV has largely driven our attention from TB, and this is something we have to redress as a matter of urgency."

"We recently launched the fixed-dose combination for TB treatment, which will make it easier for the uptake of drugs and adherence," he added. "But much more work needs to be done to integrate TB and HIV. My ministry needs to push up the management systems in order to have appropriate advocacy on TB."

According to the latest WHO data, Zimbabwe has the lowest treatment success rate among all TB high-burden countries, with just over half of all cases successfully treated.

Without a complete course of antibiotics, patients risk TB re-emerging in a drug-resistant form, which further challenges attempts to tackle the disease.

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