Kyrgyztan is a small, young, independent republic located in the heart of Central Asia. During its twenty years of independence Kyrgyztan has seen two revolutions, three presidents, 24 governments, 24 Prime Ministers and seven Constitutional changes. This tumultuous history has created a great number of migrants, both external and internal, along with the concomitant disorder; while the state budget deficit and high turnover in the health care system has also contributed to serious problems in accessing health services, including those of TB case detection and control

Recently, with the help of TB REACH funding, the National TB Program in the Kyrgyz Republic, the first in Central Asia, was able to introduce a new diagnostic test for tuberculosis – Gene Xpert MTB/RIF. By October 2012, out of 2424 people with suspected TB who had received a negative result after smear microscopy, 441 went on to be diagnosed with TB after using Xpert technology. In 122 of these cases, the tuberculosis was resistant to rifampicin. Because of the availability of Xpert technology, 309 people who would have gone undiagnosed were able to start treatment in good time and 94 of those were spared the debilitation of seeing no results, not to mention the loss of treatment time, after taking ineffective first line drugs .

Even as volunteers continue to conduct an information campaign among 21.500 migrants in targeted communities, informing them about TB prevention and the need for early detection, the introduction of Xpert will allow and encourage the restructuring of laboratory services throughout the country, improving efficiency and affording a new look at TB infection control issues as well as outpatient treatment models.

While results so far have led the National TB Program to an understanding of the need to expand the use of Xpert technology, TB REACH Wave 2 project is also aimed at developing a new model of cooperation between civil society organizations, local communities and the National TB Program, forging interconnections of mutual benefit, increasing awareness of and access to TB diagnosing and treatment.

Kyrgyztan

National TB Program in the Kyrgyz Republic





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FINDING AND TREATING PEOPLE WITH TB IN THE WORLD'S POOREST COMMUNITIES

TB REACH

The first wave of projects increased case detection by an average of 26% compared to the previous year

More than nine million people around the world become ill with tuberculosis (TB) each year. About one-third of them fail to get an accurate diagnosis or effective treatment and are more likely to die from this curable disease.

By supporting the many partners working in the field, TB REACH offers a lifeline to people among this missing 3 million by finding and treating people in the poorest, most vulnerable communities in the world. In areas with limited or non-existent TB care, TB REACH supports innovative and effective techniques to find people with TB quickly, avert deaths, stop TB from spreading, and halt the development of drug resistant strains.

- TB REACH was launched in 2010 and will run until 2016, thanks to a CAD\$ 120 million grant from the Canadian International Development Agency.
- TB REACH is committed to getting funds to our partners with a very short turnaround time.
- TB REACH has committed nearly \$50 million to partners working on 75 projects in 36 countries covering a wide range of interventions.
- Preliminary analysis from Wave 1 shows that efforts of partners led to an increase of 26% in TB case detection over an area of 100 million people, while some areas saw increases of more than 100%. The average cost per person covered is US \$0.15.

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