

GLOBAL HEALTH HOT TOPIC:

Tuberculosis in low-resource settings

Tuberculosis (TB) is the world's leading infectious killer, with over 10 million people becoming infected every year. India accounts for 25% of deaths and cases worldwide, and 16 African countries together account for another 31%. Successful **control** is being achieved through DOTS treatment campaigns and coordination with HIV.

Ending TB requires identifying and treating latent cases; stopping loss to follow-up of those diagnosed with active TB before they even start treatment (18% in Africa); addressing myths and stigma which prevent people seeking help or reporting exposure.

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CABI's Global Health database comprehensively covers hot topics that matter

Global Health draws from social, economic, environmental and public health sources to provide the complete picture of TB control in low (and high resource) settings:

- **Early testing, fast diagnosis, key to control of TB:** DNA amplification tests, are faster than smear microscopy, and are in use in low resource settings.
Evaluation of the XpertMTB/RIF for the diagnosis of pulmonary tuberculosis among the patients attending DOTS Center Parsa District of Nepal.
Nepal Journal of Biotechnology 2016
- **Drug-resistance and off-label drugs:** Differences in drug processing in patients drives drug resistance. Understanding this led to oral drugs bedaquiline & delamanid being repurposed for MDR-TB, with the added advantage of avoiding the needle.
Off-label use of bedaquiline in children and adolescents with multidrug-resistant tuberculosis.
Tuberculosis , 2018
- **Myths and stigma inhibit TB control in low incidence countries:** Tuberculosis stigma as a social determinant of health: a systematic mapping review of research in low incidence countries. International Journal of Infectious Diseases 2017. (CABI's Global Health was one of the databases consulted).
Effective communication approaches in tuberculosis control: health workers' perceptions and experiences.
Indian Journal of Tuberculosis , 2017
- **Latent tuberculosis must be addressed:** 10% will go on to be active and spread disease. Healthcare workers are examples of high risk contacts.
Do the tuberculin skin test and the QuantiFERON-TB Gold in-tube test agree in detecting latent tuberculosis among high-risk contacts? A systematic review and meta-analysis.
Epidemiology and Health 2015 (Americas, Africa, Asia and Europe, 17 countries).

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1. Mediating effect of repeated tuberculosis exposure on the risk of transmission to household contacts of multidrug-resistant tuberculosis patients.

Primary *Mycobacterium tuberculosis* transmission is an important driver of the global epidemic of resistance to tuberculosis drugs. A few studies have compared tuberculosis infection in contacts of index cases with different drug-resistant profiles, suggesting that contacts of multidrug-resistant...

Author(s): Lu Peng; Ding XiaoYan; Liu Qiao; Lu Wei; Martinez, L.; Sun JianSheng; Lu Feng; Zhong ChongQiao; Jiang Hui; Miao ChangDong; Zhu LiMei; Yang HaiTao

Publisher: American Society of Tropical Medicine and Hygiene, Deerfield, USA

Journal article: American Journal of Tropical Medicine and Hygiene 2018 Vol.98 No.2 pp.364-371 ref.21

2. Latent tuberculosis infection in health care workers: review article.

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Tuberculosis stigma as a social determinant of health: a systematic mapping review of research in low incidence countries.

Author(s): Craig, G. M.; Daffary, A.; Engel, N.; O'Driscoll, S.; Ioannaki, A.

Author Affiliation: School of Health Sciences City, University of London Northampton Square London, EC1V 0HB, UK.

Author Email: gill.craig.1@city.ac.uk

Journal article: International Journal of Infectious Diseases 2017 Vol.56 pp.90-100 ref.87

Abstract: Tuberculosis (TB)-related stigma is an important social determinant of health. Research generally highlights how stigma can have a considerable impact on individuals and communities, including delays in seeking health care and adherence to treatment. There is scant research into the assessment of TB-related stigma in low incidence countries. This study aimed to systematically map out the research into stigma. A particular emphasis was placed on the methods employed to measure stigma, the conceptual frameworks used to understand stigma, and whether structural factors were theorized. Twenty-two studies were identified: the majority adopted a qualitative approach and aimed to assess knowledge, attitudes, and beliefs about TB. Few studies included stigma as a substantive topic. Only one study aimed to reduce stigma. A number of studies suggested that TB control measures and representations of migrants in the media reporting of TB were implicated in the production of stigma. The paucity of conceptual models and theories about how the social and structural determinants intersect with stigma was apparent. Future interventions to reduce stigma, and measurements of effectiveness, would benefit from a stronger theoretical underpinning in relation to TB stigma and the intersection between the social and structural determinants of health.

ISSN: 1201-9712
DOI: 10.1016/j.ijid.2016.10.011
URL: <http://www.sciencedirect.com/science/...>
Record Number: 20173153986

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Off-label use of bedaquiline in children and adolescents with multidrug-resistant tuberculosis.

Author(s): Achar, J.; Hewison, C.; Cavalheiro, A. P.; Skrahina, A.; Cajazeiro, J.; Nargiza, P.; Herbocek, K.; Rajabov, A. S.; Hughes, J.; Ferlazzo, G.; Seddon, J. A.; Cros, P. du

Author Affiliation: Médecins Sans Frontières, London, UK.

Author Email: jay.achar@london.msf.org

Journal article: Emerging Infectious Diseases 2017 Vol.23 No.10 pp.1711-1713 ref.10

Abstract: We describe 27 children and adolescents <18 years of age who received bedaquiline during treatment for multidrug-resistant tuberculosis. We report good treatment responses and no cessation attributable to adverse effects. Bedaquiline could be considered for use with this age group for multidrug-resistant tuberculosis when treatment options are limited.

ISSN: 1089-6640
DOI: 10.3201/eid2310.170903
URL: <https://wwwnc.cdc.gov/eid/article23/10/17-0903.pdf>
Record Number: 20183061075
Publisher: National Center for Infectious Diseases, Centers for Disease Control and Prevention
Location of publication: Atlanta
Country of publication: USA
Language of text: English
Language of summary: English

Indexing terms for this abstract:

Organism descriptor(s): man, Mycobacterium tuberculosis

Descriptor(s): adolescents, antituberculous agents, bedaquiline, children, drug therapy, efficacy, human diseases, multiple drug resistance, tuberculosis

Identifier(s): Belorussia, Byelorussia, chemotherapy, subsaharan Africa, Tadzkhistan, teenagers

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