

**Inhalt**

| | |
|------------------------------------|---|
| 1. Internationale Nachrichten..... | 1 |
| 2. Forschung & Entwicklung..... | 2 |
| 3. Publikationen..... | 3 |
| 4. Kommende Veranstaltungen..... | 4 |
| 5. Impressum..... | 4 |

Internationale Nachrichten**1. TB activists storm stage at World Conference on Lung Health**

Die World Union Conference on Lung Health startete am 30. Oktober in Paris mit einer Protestaktion von Aktivist_innen und Repräsentant_innen betroffener Länder. Ihre Forderung: Mehr Ehrgeiz im Kampf gegen Tuberkulose und bei der Erlangung des Ziels "zero TB deaths, zero new infections and zero suffering and stigma!"

Source: Stop-TB Partnership, http://www.stoptb.org/news/stories/2013/ns13_069.asp (Oktober 30, 2013)

2. A DOUBLE BLOW: PRIVATE-SECTOR FUNDING FOR TB RESEARCH DROPS SHARPLY AMID SEVERE PUBLIC-SECTOR BUDGET CUTS

The *2013 Report on Tuberculosis Research Funding Trends, 2005–2012* finds that funding for tuberculosis research and development dropped by US\$30.4 million compared with 2011—the first time funding has fallen since Treatment Action Group (TAG) began tracking investments in 2005. Funding declined for diagnostic, drug, vaccine, and operational research, increasing the likelihood that new tools to fight TB will remain out of reach for the 8.7 million people who develop TB each year.

Source: TAG, <http://www.treatmentactiongroup.org/tb/press/2013/double-blow-private-sector-funding-tb-research-drops-sharply-amid-severe-public-sector> (Oktober 29, 2013)

3. Major boost for TB/HIV integration as Global Fund mandates unified funding applications

In a major step forward for people affected by tuberculosis (TB) and HIV co-infection, the Global Fund to Fight AIDS, Tuberculosis and Malaria has made a bold change to the way it approaches treatment programmes in countries with high rates of both diseases.

The strategy committee of the Board of the Global Fund has decided that, in future, any country with high rates of TB and HIV co-infection that applies for funding for treatment programmes will have to design its programmes in a single unified application for joint TB and HIV programmes, rather than submit separate proposals for each disease. The new requirement is designed to streamline programming for countries heavily burdened by the two diseases.

Source: Stop-TB Partnership, http://www.stoptb.org/news/stories/2013/ns13_070.asp (Oktober 30, 2013)

4. India's TB spending slower than planned

Confronting a slowing economy and a large budget deficit, India has significantly reduced its planned expenditure on fighting tuberculosis, the airborne disease that kills more adults here than any other infection and has become increasingly more drug resistant, a review of government plans and budgets shows.



Last year, a committee of Indian government and global health officials put together a national strategic plan to fight TB, which recommended India spend 65 billion rupees, or about \$1.05 billion, in the five years starting from 2012. By early this year, the planned five-year expenditure was scaled down substantially to 45 billion rupees, or about \$731 million according to the annual report of the Revised National Tuberculosis Control Program, India's national TB control program.

Source: India Real Time, <http://blogs.wsj.com/indiarealtime/2013/10/30/indias-tb-spending-slower-than-planned/> (Oktober 30, 2013)

Forschung & Entwicklung

1. Guidelines on Bedaquilin

Provisional guidelines from the Centers for Disease Control and Prevention (CDC) describe FDA-approved and off-label uses of bedaquiline fumarate (*Sirturo*, Janssen Therapeutics) in populations with multidrug-resistant tuberculosis (MDR TB) that were not included in clinical trials. The new recommendations (...) were published in the October 25 issue of the *Morbidity and Mortality Weekly Report*.

Download of the provisional guidelines: <http://www.cdc.gov/mmwr/pdf/rr/rr6209.pdf>

Source: TB online, <http://tbonline.info/posts/2013/10/25/cdc-issues-provisional-guidelines-bedaquiline-mult/> (Oktober 25, 2013)

2. Sputum test may not hold key to TB eradication

An on-the-spot sputum test for tuberculosis works better than the commonly-used, 125-year-old microscope method, but did not reduce illness in a southern African trial, a study said Monday. While the new test, dubbed Xpert MTB/RIF, diagnosed tuberculosis (TB) quicker and got people onto treatment sooner, it did not seem to change their long-term prognosis, said the study in *The Lancet* medical journal.

Source: France 23, <http://www.france24.com/en/20131028-sputum-test-may-not-hold-key-tb-eradication> (Oktober 28, 2013)

3 Svizera Europe and TB Alliance - New Collaboration Will Develop Childhood TB Medicines

In an effort to develop and deliver treatments for children with tuberculosis (TB)—answering a critical need in public health today—TB Alliance (...) has entered into a collaboration with Svizera Europe, one of the leading global supply and distribution companies for TB treatments. The partnership aims to create and enable access to new medicines for childhood TB. Tuberculosis is among the top 10 killers of children and an estimated 500,000 children have TB, but many suspect the burden could be much higher.

Source: TB Alliance, <http://tballiance.org/newscenter/view-brief.php?id=1087> (Oktober, 3 2013)

4. Pros and cons of high-tech TB testing

A new sophisticated diagnostic test for tuberculosis now being rolled out promises to be faster and more accurate than the old methods and much easier to use. But the first trials of the GeneXpert MTB/RIF Assay test in real-life situations have proved that while all this is true, it did not make any significant difference to treatment outcomes.

Now researchers from Cape Town University have looked at what actually happened when the system was installed in primary health care TB clinics in South Africa, Zimbabwe, Zambia and Tanzania. It was operated by nurses who had been given just one day's training, and patients presenting at the clinics with TB-like symptoms were randomly assigned to either conventional testing or to testing with the GeneXpert machines. Their results have now been [published](#) in the London-based medical journal, the *Lancet*.



Source: IRIN News, <http://www.irinnews.org/report/99021/pros-and-cons-of-high-tech-tb-testing?mkt> (Oktober, 29 2013)

5. Researchers complete landmark African TB study

The first phase of a landmark study of complications of tuberculosis – the first ever carried out in Africa - has been completed by researchers at UHSM and the University of Manchester working with colleagues in Uganda. They believe that their results have important implications for better understanding a disease that kills three people every minute and affects 8.7 million worldwide annually.

Source: UHSM, <http://www.uhsm.nhs.uk/news/Pages/tb.aspx> (Oktober, 2013)

Publikationen

1. Global tuberculosis report 2013

Am 25. Oktober veröffentlichte die WHO ihren Welt-Tuberkulose Bericht 2013. Darin wird bestätigt, was von der Mehrheit in den Ländern des globalen Nordens bisher ignoriert wird: Tuberkulose (TB) stellt eine Krise der öffentlichen Gesundheit dar, deren Bekämpfung deutlich mehr Ressourcen und politischen Willen auf höchster Ebene bedarf, als dies bisher der Fall ist.

Zwar ist die Rate der Neuerkrankungen im Vergleich zum Vorjahr um 2% gesunken, doch bleibt TB mit 8,6 Millionen Neuerkrankungen und 1,3 Millionen Todesfällen im Jahr 2012 eine der tödlichsten Infektionskrankheiten weltweit. Die Kontrolle über die Krankheit wird durch drei Faktoren besonders gefährdet: Die zunehmend resistenten Formen der TB, die sogenannte MDR-TB (=multi drug-resistant-TB), die aufgrund fehlender neuer Arzneimittel gar nicht oder nur ungenügend behandelt werden kann, die hohe Koinzidenz von TB mit dem HIV-Virus sowie die große Zahl nicht diagnostizierter und nicht behandelter Erkrankter.

Source: WHO, http://www.who.int/tb/publications/global_report/en/index.htm, (Oktober 25, 2013)

2. Health experts warn of escalating TB and HIV crisis in Eastern Europe and Central Asia as funding levels are set to sharply drop

As the Global Fund to Fight AIDS, Tuberculosis and Malaria Board holds its 30th Board Meeting in Geneva, health experts warn that projected reductions in funding for TB and HIV in Eastern Europe and Central Asia look set to leave the region with rising rates of HIV and drug-resistant TB. A report written by leading health organizations calls on the donor community to work collectively to address this challenge.

European Union institutions and international donors cannot turn a blind eye to the TB and HIV epidemics occurring in the greater European Region. Health NGOs call on the European Commission to scale up its contribution to the Global Fund to €450 million for 2014-2016. They also call for the Global Fund to urgently re-evaluate its eligibility criteria and to scale up resources for world's region worst affected by drug-resistant rates of TB.

Source: TB European Coalition, <http://www.tbcoalition.eu/2013/11/06/health-experts-warn-of-escalating-tb-and-hiv-crisis-in-eastern-europe-and-central-asia-as-funding-levels-are-set-to-sharply-drop/> (November 06, 2013)



Kommende Veranstaltungen

1. Diskussionsveranstaltung des Stop-TB Forums

Tödliche Kombination – TB/HIV-Koinfektion

Das Stop-TB Forum nimmt den diesjährigen Welt-Aids-Tag zum Anlass, um die Gefahren und Problematiken der TB/HIV-Koinfektion aus verschiedenen Perspektiven zu beleuchten und mögliche Lösungsansätze zu diskutieren.

Mit diskutieren werden:

- Cordula Ehlers (Take That TB)
- Dr. Heiko Karcher (HIV Schwerpunktpraxis City Ost, Berlin)
- Dr. Ralf Otto-Knapp (Deutsches Zentralkomitee zur Bekämpfung der Tuberkulose)
- Hendrik Napierala (Universities Allied for Essential Medicines, Deutschland)

Datum: 02. Dezember 2013, 18-21:00 Uhr

Ort: Kaiserin-Friedrich-Stiftung (Robert-Koch-Platz 7, Berlin)

Impressum:

Stop-TB Forum

Maja Volland

Luisenstraße 58/59

10117 Berlin

Tel.: +49-30-700 130 192

Mobil: +49-(0)176-98813131

Email: info@stop-tb.de