Stop B Partnership

SUMMARY SHEET

Agenda Nr. 1.07-4.0	Subject	TB Determinants (dTB) Project		
For Information 🖂	For Discussion \boxtimes		For Decis	sion 🗌

Rationale

Recent observations suggest that the DOTS strategy may not have had the anticipated impact in terms of rapid decline of incidence in some settings. "Risk factors" other than HIV – such as smoking, malnutrition, diabetes, indoor air pollution, crowding, etc – are important determinants of TB burden. Failure to reduce TB burden as expected may be explained by these risk factors as well as a broad array of socioeconomic and demographic factors that determine the risk of exposure to them. An analysis of these risk factors and their determinants will contribute to the further evolution of the Stop TB Strategy as well as to the ongoing work of the Commission on Social Determinants of Health (CSDH).

Summary

The purpose of the dTB project is to; quantify the population level impact on the TB epidemic of various risk factors; quantify more precisely the epidemiological patterns associated with the apparent failure to rapidly reduce transmission and incidence; and explore possible areas of interventions not yet fully covered in the Stop TB Strategy. The work has started with a preliminary analysis of the population level impact of selected risk factors on TB disease, which suggests that, globally, malnutrition, smoking, diabetes, and indoor air pollution may be more important risk factors for TB disease than HIV. The work is continuing with assessment of other factors such as urbanisation and crowded living conditions, as well as with country case studies to analyse in detailed the trends in transmission and incidence based on routine surveillance data.

Decisions requested (from the Stop TB Coordinating Board)

• Provide feedback on the potential policy and strategy changes that may result from the project. Consider how WHO and the Partnership can contribute more proactively to advocacy on the need to address TB determinants, including those that lie outside the health sector.

Implications

The project may lead to identification of intervention areas which are not yet fully covered or explicitly mentioned in the Stop TB Strategy, including interventions with a more prominent preventive focus. Such interventions may be on a programmatic level. For example, NTPs and partners may need to more proactively support other public health programmes (not just HIV programmes) to help address smoking, malnutrition, diabetes, indoor pollution, etc. Such actions would be a continuation of current work pursued under the Stop TB Strategy component on Contribution to Health Systems Strengthening, including Practical Approach to Lung Health and contribution to strengthened PHC. Interventions would also include advocacy on the need to address TB determinants that lie outside the health care sector, such as those related to social, economic and environmental policy on national and international level. The results will also have implications for the way in which TB statistics are compiled and evaluated, given the need to monitor concurrent illness and exposure to various causes of ill health.

Next Steps

Action Required: Complete analyses as outlined above. Prepare a paper summarizing the results of the dTB project and a chapter on social determinants of TB for the CSDH.

Focal Points: TBS and TME - WHO Stop TB Dept. (Dye, Lönnroth, Jaramillo, Williams)

Timeframe: December 2007