Once thought nearly conquered, tuberculosis (TB) is now a global epidemic. With the combined threats of HIV, diabetes, and other chronic diseases, as well as the emergence of multi-drug resistant TB, the challenges of the disease are overwhelming national health systems. Yet TB is preventable, diagnosable, and curable.

Management Sciences for Health (MSH) is working in 42 countries with international, national, and local partners to strengthen the capacity of health systems, national TB programs, and health managers to prevent the spread of TB and improve the lives of those affected by it. Our approach strengthens health systems—building skills and sustainability, strengthening laboratory systems, ensuring continuous availability of medicines and supplies, integrating TB into HIV and other health services, and bolstering local leadership and management.

MSH develops innovative strategies to bring diagnostic, preventive, and treatment services to high-risk populations—including children, displaced persons, and those living with HIV, diabetes, and other diseases. We consistently apply evidence-informed knowledge and technical expertise to highly complex environments and in fragile states, where TB services are most desperately needed.

The Challenge of TUBERCULOSIS

Every 15 seconds TB claims a life.

TB is the #1 killer due to a single infectious agent, surpassing HIV & AIDS deaths.

37% of new TB cases were undiagnosed or not reported in 2014.

Nearly 10 million people developed TB in 2014.

People living with HIV are 30 times more likely to develop TB disease than people without HIV.

Over 95% of TB deaths occur in low- and middle-income countries, and it is among the top three causes of death for women aged 15 to 44.

43 million lives were saved by effective diagnosis and treatment of TB between 2000 and 2014.

msh.org
MSH’S LEADERSHIP IN TB

Over the last four decades, MSH has worked in over 150 countries to strengthen health systems, in collaboration with public and private, global and local partners. Our technical expertise informs global TB initiatives. Within countries, MSH works with public- and private-sector partners and engages communities in improving the management systems and leadership skills essential for controlling TB—and increasing political support for effective TB programs.

In Afghanistan, Bangladesh, and South Sudan, MSH serves as lead implementing partner of Challenge TB (CTB)—the flagship program for the End TB strategy of the US Agency for International Development (USAID). MSH is also a supporting partner for Challenge TB in Nigeria and key partner in Ethiopia. Challenge TB is pioneering an Urban DOTS strategy in Kabul and other cities in the fragile state of Afghanistan. CTB/South Sudan is forging new ways of delivering TB services in internally displaced persons (IDP) camps, and high-security, Protection-of-Civilian camps at United Nations Mission bases.

In Ethiopia From 2011 to 2016, the USAID-funded Help Ethiopia Address Low TB Performance (HEAL TB) project, led by MSH, made high-quality TB services accessible to over 50 million people—more than half the country’s population. It used innovative, cost-effective strategies to more than double initial targets, working with the Ministry of Health to screen 16 million people for TB at health facilities, and diagnose and treat 250,000 TB patients, with a 95 percent treatment success rate and 91 percent cure rate. Among TB patients, 94 percent were tested for HIV in project areas; and 90 percent of those co-infected were started on antiretroviral therapy.

In Uganda Since 2013, the US President’s Emergency Plan for AIDS Relief (PEPFAR) and USAID-funded Track Tuberculosis Activity (TRACK TB) project, led by MSH, has helped health workers diagnose and treat over 22,000 Ugandans for TB and initiate antiretroviral therapy (ART) for those co-infected with TB and HIV. The project shows how a mixed model—of facility-based initiation, followed by community-based care—can rapidly scale up MDR-TB services without overwhelming the healthcare system. Thanks to project support, MDR-TB is now treated in 15 hospitals, from three at project startup. TRACK TB is also creating an effective Urban DOTS model in Kampala.

Strengthening TB and HIV & AIDS Responses in Eastern Uganda (STAR-E) — provides technical assistance to health management teams in 12 districts with a combined population of 2.7 million people. A USAID project funded by the President’s Emergency Plan for AIDS Relief (PEPFAR) and implemented by an MSH-led consortium, STAR-E has scaled up support to 154 health facilities to offer integrated HIV and TB services, up from 1 in 2009. By 2015, more than 400,000 people were being tested for HIV per year, up from fewer than 30,000 in 2009. The treatment success rate rose from 50 percent in 2009 to 87 percent in 2015.

In Nigeria USAID-funded and MSH-led Prevention and Organizational Systems AIDS Care and Treatment (Pro-Act) project has pioneered the integration of TB and HIV activities in Nigeria, with collaborative services in 41 care and treatment sites throughout five states. The use of GeneXpert technology in eight sites across five project states is facilitated 3,158 samples evaluated for TB with 276 (6.5%) confirmed to be co-infected.

Worldwide The USAID-funded Systems for Improved Access to Pharmaceuticals and Services (SIAPS) program, implemented by MSH, works in some 20 countries to strengthen health systems to expand access to lifesaving medicines and pharmaceutical services.

QuanTB: Helping TB Programs Organize a Reliable Flow of Medicines

TB treatment is complex, as is ensuring that the right medicines are available without interruption. To promote a systems-strengthening approach to managing TB medicines, SIAPS developed QuanTB—a downloadable tool that transforms complicated calculations into a user-friendly dashboard displaying available months of stock, quantities soon to expire, early warnings for risk of stock-outs, and other vital supply planning information.

Now in its fourth version and available in six languages, QuanTB has been downloaded over 1,400 times. At least 14 countries have adopted it as their national tool for quantification and monitoring of TB drugs.

QuanTB version 4.0 and its user guide are available for download to anyone tasked with medicines management: www.SIAPSProgram.org/QuanTB

For more information about MSH’s work in the area of Tuberculosis and other infectious diseases, contact Pedro Suarez, Senior Director, Infectious Disease Unit, psuarez@msh.org.