

Tuberculosis country work summary

Lithuania

Total population (millions): 3.3 High TB priority country High MDR-TB burden country

Epidemiological profile 2010**

Estimates of TB burden	Number (thousands)	Rate (per 100 000)
Mortality Prevalence Incidence	0.37 (0.24-0.56) 3.1 (1.1-5.3) 2.3 (2.0-2.7)	11 (7.1-17) 94 (34-159) 69 (59-80)
Case detection rate	e 76 (66-89) %	

MDR-TB burden	Number	%
Estimates among notified TB cases: MDR-TB among new cases MDR-TB among previously treated cases	140 (120-170) 190 (170-210)	11 (9-13) 52 (47-57)
Notified MDR-TB cases on treatment	310	100

Estimated prevalence of HIV among TB (number, percentage); 10 (5-16); 0.4 (0.2-0.7)%.

Treatment outcome 2009	Successfully treated (%)	Died (%)	Failed (%)	Lost to follow up* (%)
New laboratory confirmed cases	73.4	9.7	1.7	15.2
New laboratory unconfirmed/extrapulmonary	85.6	6.8	0.5	7.1
Previously treated cases	29.7	24.3	4.7	41.3
MDR-TB cohort 2008	NA ⁺	NA⁺	NA^+	NA^{+}

^{*}Includes those cases that defaulted from treatment, those that were transferred out and those that were not evaluated.

Major challenges

Despite the decline in tuberculosis (TB) incidence in recent years, the TB epidemiological situation in Lithuania is still serious, with high rates of multidrug-resistant (MDR) TB and TB/HIV co-infection. The country is among the 27 high MDR-TB burden countries in the world.

The mechanisms for effective follow-up of patients to prevent them from defaulting from treatment are underdeveloped for all patients. The default rate is particularly high among MDR-TB patients. In addition, treatment outcome monitoring of MDR-TB cases is inadequate.

Infection control measures in TB service facilities are also inadequate, which results in nosocomial TB infection.

Achievements in collaboration with WHO

- Support for the preparation of a national programme for TB prevention and control, 2011–2014 and for the development of a national plan to control multidrug- and extensively drug-resistant (M/XDR) TB.
- The international tender for procurement of second-line anti-TB drugs is on track. Several pharmaceutical companies, including the International Dispensary Association through the Green Light Committee (GLC), took part in the tender.
- A training workshop for pulmonologists on MDR-TB treatment, management, surveillance and infection control was conducted.

Planned WHO activities

- Finalization of the National M/XDR-TB Response Plan in line with the Regional M/XDR-TB Action Plan.
- Technical assistance for the implementation and expansion of outpatient TB case management.
- Support for activities to improve TB patient adherence, such as patient education and social support for TB patients.
- Technical assistance for primary health care facilities with directly observed therapy (DOT) and social support for TB patients during the continuation phase of treatment in order to prevent default and thus improve treatment success rates.

^{*}NA; not available.

^{**}Data provided here are based on the latest WHO global TB database accessed on 9 December 2011. Extended epidemiological profiles can be found at: http://www.who.int/tb/country/data/profiles/en/index.html

- Support for implementation of the national programme for TB prevention and control, 2011–2014.
- Support for implementation of the national plan to control M/XDR-TB.
- Technical assistance to develop the algorithms for rapid diagnosis of TB and drug resistant TB for optimal use of the available rapid diagnostic technologies.

Main partners of WHO

- Ministry of Health
- Ministry of Justice
- Local nongovernmental organizations (NGOs)
- Green Light Committee (GLC)
- Rotary National and International.