

# Turkmenistan

Total population (millions): 5.0  
High TB priority country

## Epidemiological profile 2010\*\*

Estimates of TB burden	Number (thousands)	Rate (per 100 000)
Mortality	1.0 (0.7-1.9)	20 (13-37)
Prevalence	3.9 (1.0-6.9)	77 (19-137)
Incidence	3.3 (2.7-4.0)	66 (54-80)
Case detection rate	96 (80-120) %	

MDR-TB burden	Number	%
Estimates among notified TB cases:		
MDR-TB among new cases	100 (29-50)	4 (1-10)
MDR-TB among previously treated cases	15 (9-23)	18 (11-28)
Notified MDR-TB cases on treatment	NA <sup>+</sup>	

Estimated prevalence of HIV among TB; NA<sup>+</sup>

Treatment outcome 2009	Successfully treated (%)	Died (%)	Failed (%)	Lost to follow up* (%)
New smear-positive cases	83.8	4.7	6.2	5.3
New smear-negative/extrapulmonary	NA <sup>+</sup>	NA <sup>+</sup>	NA <sup>+</sup>	NA <sup>+</sup>
Previously treated cases	NA <sup>+</sup>	NA <sup>+</sup>	NA <sup>+</sup>	NA <sup>+</sup>
MDR-TB cohort 2008	NA <sup>+</sup>	NA <sup>+</sup>	NA <sup>+</sup>	NA <sup>+</sup>

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

<sup>+</sup> 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>

## Major challenges

The quality of tuberculosis (TB) services needs to be improved and infection control in TB facilities is poor. There is a lack of effective diagnosis of TB due to the absence of clear criteria for sending sputum for culture examination and drug susceptibility testing. The system of recording and reporting on anti-TB drugs is not unified. No strategy has been implemented for the diagnosis and treatment of patients with multidrug-resistant (MDR) TB. The management of anti-TB drugs at central level is still under development. Although a national drug coordinator has been formally appointed, most of the functional responsibilities are still distributed among different employees at the National Centre of TB Prevention. As a consequence, anti-TB drugs lack quality assurance and can be obtained without a doctor's prescription.

The laboratory network in Turkmenistan lacks capacity to perform culture and anti-TB drug susceptibility testing and rapid diagnostics. Furthermore, there are currently 55 peripheral laboratories that perform Ziehl-Neelsen microscopy for the diagnosis of TB, but the workload in some of these laboratories is too low. Therefore the TB laboratory network needs to be rationalized.

## Achievements in collaboration with WHO

- There is strong political commitment to TB control at all levels in the country and the TB programme is supported by the Global Fund to Fight AIDS, Tuberculosis and Malaria (The Global Fund).
- Technical assistance to introduce elements of DOTS countrywide, including 100% coverage of the penitentiary system.
- Technical assistance to optimize the TB laboratory network and introduce new methods for laboratory diagnosis of TB.
- Technical assistance to integrate primary health care with anti-TB services across the country, including training of family doctors and nurses.
- Technical assistance to develop a protocol for a nationwide anti-TB drug resistance survey.
- Technical assistance to develop treatment protocols and a diagnostic algorithm for MDR-TB patients.
- An electronic TB register has been established.
- A Green Light Committee (GLC) mission and an infection control assessment mission were conducted.
- Technical assistance to revise recording and reporting forms.

**Planned WHO activities**

- Finalization of the National M/XDR-TB Response Plan to align it with the Regional M/XDR-TB Action Plan.
- Technical assistance to improve the quality of the Stop TB Strategy throughout the country, including laboratory diagnosis of TB.
- Technical assistance to introduce appropriate infection control in TB facilities.
- Development and implementation of a nationwide anti-TB drug resistance survey protocol in cooperation with the Supranational Reference Laboratory.
- Health system strengthening mission to increase the capacity of the National TB Programme (NTP) central team.
- Two months' in-country technical assistance to support the programmatic management of MDR-TB patients in line with WHO recommendations and infection control requirements.
- Technical assistance to further strengthen the TB laboratory network.

**Main partners of WHO**

- Ministry of Health
- United Nations Development Programme (UNDP), the principal recipient of the Global Fund Round 9 TB grant
- United States Agency for International Development (USAID)
- National Red Crescent Society.