

Epidemiological burden and response monitoring¹

Main impact indicators	Number	Rate per 100 000
Incidence (including HIV+TB)	6 200	152.00
Mortality (including HIV+TB)	490	12.04
Incidence (HIV+TB only)	550	13.00
Mortality (HIV+TB only)	180	4.50
Incidence (RR/MDR-TB ^a only)	3 900	95.85

TB detection and care	Number	%
Total TB new and relapses detected	3 608	58.2
Pulmonary TB	3 265	90.5
Bacteriologically confirmed	2 075	63.6
TB detected with rapid diagnostics	3 054	84.6
Successfully treated	2 742	78.8

MDR-TB detection and care	Number	%
RR/MDR-TB estimates among new TB		32.0
RR/MDR-TB estimates (previously treated TB)		69.0
RR/MDR estimates (notified pulmonary TB)	1 700	
Tested for RR/MDR-TB	2 390	56.8
Detected with RR/MDR-TB from estimates	1 042	61.3
RR/MDR-TB started SLD ^b treatment	945	90.7
Successfully treated (RR/MDR-TB only)	538	57.1

HIV/TB detection and care	Number	%
TB cases tested for HIV status	3 439	95.3
HIV/TB cases detected from estimates	300	54.5
HIV/TB cases on ARV ^c	197	65.7
Successfully treated (HIV/TB only)	127	52.7
HIV diagnosis and care		
Newly diagnosed HIV cases	683	
HIV cases started IPT ^d	-	-

^a RR/MDR = rifampicin-resistant multidrug-resistant TB.

^b SLD = second-line drug.

^c ARV = antiretroviral treatment.

^d IPT = isoniazid preventive therapy.

Major challenges

The Republic of Moldova is one of the 18 high-priority countries to fight tuberculosis (TB) in the WHO European Region and 30 high multidrug-resistant TB (MDR-TB) burden countries in the world. The rates of TB-HIV co-infection are also high: HIV prevalence among all TB cases in 2015 was estimated at 9%. Although the TB mortality and notification have been declining, some challenges still exist. They are as follows.

- Excessive hospitalization of TB patients and underutilization of primary healthcare and outpatient services for TB diagnostics and treatment.
- MDR-TB prevention and control issues, such as development of a new patient-centred model of delivering and financing TB services, and achieving universal access to rapid diagnosis of multidrug and extensively drug-resistant TB (M/XDR-TB) and its treatment with new and repurposed drugs, remain.
- The Transnistria region still holds the highest rates of TB incidence and mortality and should be targeted for priority interventions.
- The national TB programme's (NTP's) central unit should be further strengthened.

Achievements

Achievements in collaboration with WHO are as follows.

- The Republic of Moldova is among the 11 high-priority countries of the TB Regional Eastern European and Central Asian Project (TB-REP) financed by the Global Fund and implemented by the Centre for Health Policies and Studies (PAS Centre) and partner organizations, including WHO.
- The national TB programme for 2016–2020 has been approved.
- Green Light Committee (GLC) missions to follow up on previous recommendations and programmatic management of drug-resistant tuberculosis (DR-TB) took place in June and November 2016.
- A national working group on the Practical Approach to Lung Health (PAL) was established in August 2016 and PAL algorithms and electronic applications for mobile telephones and tablets have been developed.

¹ European TB surveillance and monitoring report in Europe 2017. Copenhagen: WHO Regional Office for Europe; 2017 (<http://www.euro.who.int/en/health-topics/communicable-diseases/tuberculosis/publications/2017/tuberculosis-surveillance-and-monitoring-in-europe-2017>).

- Capacity-development activities for national partners include:
 - five participants from the Transnistria region (representing civilian and prison sectors) attending the second international training course on strengthening TB control in prisons of M/XDR-TB high-burden countries at the WHO Collaborating Centre for Prevention and Control of TB in Prisons in Baku, Azerbaijan, in May 2016;
 - 12 participants attending the international training course on clinical management of DR-TB at the WHO Collaborating Centre in Riga, Latvia, in September 2016; and
 - two participants attending WHO-organized training on health system strengthening for improved TB prevention and care in Barcelona, Spain, in October 2016.
- A TB epidemiological impact analysis was conducted in October 2016 to revise estimates of TB incidence and mortality.
- A national TB sustainability plan has been developed for the handover of Global Fund-supported activities to the Ministry of Health.

WHO activities

Planned WHO activities are to provide:

- support to ensure effective participation in the implementation of TB-REP;
- technical assistance on programmatic management of DR-TB, including through GLC monitoring missions; and
- technical assistance to update national TB guidelines for adult and child care.

Main partners of WHO

- Ministry of Health, various departments
- Ministry of Justice, Department for Prison Facilities
- National TB Institute and NTP Management
- Centre for Health Policy and Research, a principal recipient of the Global Fund TB grant
- Project Coordination Unit, a principal recipient of the Global Fund TB grant
- health authorities in the Transnistria region
- Global Fund to Fight AIDS, Tuberculosis and Malaria.