



Detailed programme

Wolfheze 2011 Consolidated and Urgent Actions to Prevent and Combat M/XDR TB

10th WHO National TB Programme Managers' Meeting, 15th Wolfheze Workshops
Jointly organized by
World Health Organization Regional Office for Europe, European Center for Disease Control
and KNCV Tuberculosis Foundation
25 May – 27 May 2011, The Hague (The Netherlands)

Background

Since 1990, the KNCV Tuberculosis Foundation, WHO headquarters and the WHO Regional Office for Europe, the International Union Against Tuberculosis and Lung Disease (The Union) and EuroTB/ECDC have jointly organized a series of workshops, known as "Wolfheze Workshops", since they were named after a village in the Netherlands where the first meetings for the National TB Programme (NTP) Managers of low TB prevalence countries in Western Europe took place. Since 2002, the workshops have been jointly organized with the WHO European NTP Managers' Meeting, which focuses on management and coordination of TB control efforts in the countries with high TB prevalence of Central and Eastern Europe and Central Asia.

The workshops aim to strengthen tuberculosis control in the WHO European Region, with emphasis on formulating guidance documents and standards based on a consensus-building approach involving tuberculosis control experts, national TB surveillance correspondents, and representatives of Ministries of Health. This has resulted in several publications of consensus documents and position papers.

In October 2007, at the Ministerial Forum jointly organized in Berlin by WHO and the Ministry of Health of Germany, *The Berlin Declaration on Tuberculosis* was endorsed as a sign of renewed political commitment by all countries of the WHO European Region. This political commitment should become operational through implementation of the *Plan to Stop TB in 18 High-priority Countries in the WHO European Region, 2007-2015*, and the *Framework Action Plan to fight TB in the European Union* launched by ECDC on 17 March 2008.

Wolfheze Workshops 2011 will review the progress made following the Berlin Declaration and finalize the Consolidated Action Plan to Prevent and Combat M/XDR-TB in WHO European Region 2011-2015. Discussions will focus on the challenges and opportunities shared by WHO Member States towards achieving Millennium Development Goal No. 6 by 2015, programmatic management of MDR/XDR-TB, drug management, enhanced case-finding within high risk settings, childhood TB and improved case management across European borders, while safeguarding the basic human rights of TB patients.

Scope and purpose

1. To review the progress made in TB control in the Member States following the Berlin Declaration with particular attention to the regional and national responses to MDR-TB
2. To discuss, finalize and endorse the Consolidated Action Plan to Prevent and Combat M/XDR-TB in WHO European Region 2011-2015
3. To review the progress of the Wolfheze working groups.
4. To present the latest evidence for development of effective TB control policies.
5. To bridge the technical and operational gaps by exchanging information in specific areas related to TB control in high TB priority countries and low and medium TB burden countries.

Tuesday 24 May 2011

16:00 – 18:00

Registration of participants

18:00 – 19:00

Welcome reception

Welcome note

H.E. Mrs. Sandra Elisabeth Roelofs, First Lady of Georgia,
Country Coordinating Mechanism Chairperson and WHO Goodwill Ambassador

Wednesday 25 May 2011

09:00- 09:30

Opening session

Welcome note

Peter Gondrie, Executive Director
KNCV Tuberculosis Foundation

Masoud Dara, Programme Manager, Tuberculosis & M/XDR-TB
World Health Organisation Regional Office for Europe

Davide Manissero, TB Programme Coordinator
European Centre for Disease Prevention and Control

Special address

Annette de Boer, Head Policy, Management and Advice Unit
*Centre for Infectious Disease Control,
Dutch National Institute for Public Health and the Environment*

Wednesday 25 May 2011

09:30- 13:00

Session 1

Consolidated Action Plan to Prevent and Combat M/XDR-TB in WHO European Region 2011-2015 and Follow-up of EU Action Plan

Coordinators: Masoud Dara, Davide Manissero
Chairpersons: Masoud Dara, Davide Manissero
Reporter: Ogtay Gozalov

Background

In response to the alarming problem of Multidrug resistant tuberculosis (MDR-TB) and Extensively drug resistant Tuberculosis (XDR-TB) in WHO European Region, a Consolidated Action Plan has been developed for 2011 to 2015 to function as a road map for the Member States, WHO/Europe and partners. The Plan is being prepared in region-wide consultation with experts, patients and communities suffering from the disease. The prefinal version of the Plan need to be discussed for final endorsement by the WHO Regional Committee in Baku September 2011.

Under a WHO/Europe project to develop a region-wide TB Monitoring Framework (for follow-up of Berlin Declaration and Consolidated Action Plan to Prevent and Combat M/XDR-TB in WHO European Region 2011-2015), a task force was established in March 2011. The Taskforce has prepared their first draft framework which will be presented for discussion during the NTP managers' meeting/Wolfheze.

Content of the session

1. Regional Action Plan to Prevent and Combat M/XDR-TB
2. Monitoring Framework for follow-up of Berlin Declaration
EU Framework for Action Plan

Methodology

- Plenary presentations
- Discussion in working groups
- Reporting of the working group in the plenary and discussion

Objectives

- To solicit remarks and suggestion of the participants on prefinal draft of the Consolidated Action Plan to Prevent and Combat M/XDR-TB in WHO European Region 2011-2015
- To discuss a draft monitoring framework for Berlin declaration and Consolidated Action Plan to Prevent and Combat M/XDR-TB in WHO European Region 2011-2015
- To follow-up implementation and monitoring of EU Action Plan

Expected outputs

- Participants have provided inputs and/or endorsed the prefinal draft of Consolidated Action Plan to Prevent and Combat M/XDR-TB in WHO European Region 2011-2015
- The process of finalizing a monitoring framework for follow-up of Berlin declaration and Consolidated Action Plan to Prevent and Combat M/XDR-TB in WHO European Region 2011-2015 has been approved.

Time	Title of talk	Speakers/facilitators
09:30 – 09:50	Follow-up of the EU TB Action Plan	Davide Manissero
09:50 – 10:10	Consolidated Action Plan to Prevent and Combat M/XDR-TB in WHO European Region 2011-2015 in a nutshell	Hans Kluge
10:10 –10:30	Structure of Monitoring Frame work for Follow-up of Berlin declaration and Consolidated Action Plan to Prevent and Combat M/XDR-TB	Andrei Dadu
10:30 –10:40	Introduction to working group	Masoud Dara
10:40 –11:10	<i>Coffee break</i>	
11:10- 12:15	Working groups	
12:15-13:00	Group reporting and plenary discussion	Participants
13:00-14:00	<i>Lunch break</i>	

Wednesday 25 May 2011

14:00 – 17:30

Session 2

Drug management and rational use of drugs

Coordinators: Kaspars Lunte, Giovanni Battista Migliori
Chairperson: Pierpaolo de Colombani, Andre Zagorsky
Reporter: Nonna Turusbekova

Background

The essential role of quality drugs in TB control is well known. Even in Europe, problems related to difficulties in procuring anti-TB drugs have been described, due to several factors including low TB burden of limited number of MDR-TB cases to manage. Several Countries in Europe are involved in GLC projects and the recent new developments of the GLC mechanisms needs to be discussed and known. Last but not least the rational use of drugs is a key priority in Europe as elsewhere and clear commitment from European Institutions and Scientific Societies (as the European Respiratory Society) is necessary.

Content of the session

1. Quality assured drugs: availability and procurement
2. Second-line drugs and GLC's new functioning
3. Consequences of improper drug management
4. GeneXpert: Impact on drug management
5. Rational use of drugs

Methodology

- Plenary sessions
- Plenary discussion
- Discussions in working groups and reporting in plenary session

Objectives

- To update participants on availability of drugs and changes in GDF
- To inform participants on the news on the GLC mechanism
- To collect information on drug availability in Europe and discuss steps forwards

Expected outputs

- Identification of European priorities on drug management and rational use of drugs
- Initiation of a European survey on drug availability in Europe

Time	Title of talk	Speakers/facilitators
14:00-14:20	SLDs and news in the procurement mechanism: an update from GDF	Lunte Kaspars
14:20-14:40	Green Light Committee GLC: what's new?	Masoud Dara
14:40-15:00	Inappropriate TB drug regimens and MDR-TB	Marieke van der Werf
15:00-15:20	ERS views and commitment on the rational use of drugs	Giovanni Battista Migliori
15:20-15:40	Plenary discussion	
15:40-15:45	Introduction to working groups	Pierpaolo de Colombani
15:45-16:15	<i>Coffee break</i>	
16:15-16:45	Working into groups 1. Measures to improve rational use of anti-TB medicines in Europe 2. What data collection and information processing is required to properly manage pharmaceuticals and commodities?	Pierpaolo de Colombani Andre Zagorsky
16:45-17:30	Group reporting and plenary discussion	Participants

Thursday 26 May 2011

9:00 – 11:15

Session 3 Childhood TB

Coordinators: Liesbeth Schölvinck, Iveta Ozere
Chairpersons: Malgorzata Grzemska, Davide Manissero
Reporter: Ieva Leimane

Background

Worldwide, at least 1million TB cases occur each year in children under 15 years of age. Children friendly diagnostic tools and drugs are lacking. Recording and reporting system is not sufficient, surveillance data are missing. Children with TB infection represent the reservoir of TB disease in future. Despite policy guidelines the implementation of contact tracing and delivery of isoniazid preventative therapy (IPT) to young and HIV infected children is often neglected by public health programs. Childhood TB treatment is often not integrated into HIV, maternal and child health programs; BCG vaccine has limited efficacy in time and effects. Children are rarely included in clinical trials of new diagnostics, drugs and/or preventive strategies.¹

Content of the session

1. Key messages from International Childhood TB Meeting Stockholm, March 2011
2. Epidemiology: ECDC data 2000-2009/10 yrs analysis of Childhood TB data and beyond
3. Case finding (contact investigation); diagnostic peculiarities
4. Childhood TB treatment (new WHO-guidelines 2010)
5. Childhood X/MDR TB treatment; experience from Latvia

Methodology

- Presentation
- Plenary discussion
- Questions and answers

Objectives

1. Provide countries with latest updates on Childhood TB epidemiology, diagnostics and treatment (global perspective)
2. Share experience, best strategies and achievements (countries perspective)

Expected outputs

1. Childhood TB will be addressed in the National TB programs' strategic plans
2. Countries' programmatic and technical capacity will be built on Childhood TB diagnostics, treatment and care
3. WHO guidelines on childhood TB will be adapted for country needs

Time	Title of talk	Speakers/facilitators
09:00 - 09:10	Key messages from the International Childhood TB Meeting Stockholm, March 2011	Davide Manissero
09:10 - 09:25	Epidemiology of childhood TB, ECDC data	Andreas Sandgren
09:25 - 09:35	Childhood TB in Germany	Barbara Hauer
09:35 - 09:55	Diagnostic dilemma's in case finding	Liesbeth Schölvinck
09:55 - 10:10	Rapid Advice: Treatment of TB in Children (new WHO guideline)	Malgorzata Grzemska
10:10 - 10:30	Epidemiology and treatment of TB and X/MDR TB in children in Latvia	Iveta Ozere
10:30 - 11:00	Questions and answers Discussion on challenges and actions in future	Malgorzata Grzemska Davide Manissero
11:00 - 11:15	<i>Coffee break</i>	

¹ Call to action for Childhood TB 'International Childhood Tuberculosis Meeting', 17-18 March, 2011, Stockholm, Sweden.

Thursday 26 May 2011

11:15 – 14:00

Session 4

Xpert MTB/RIF assay: Operational considerations and interim diagnostic algorithms

Coordinators: Connie Erkens, Fuad Mirzayev, Kristin Kremer
Chairpersons: Hans Kluge, Gunta Dravniece
Reporters: Nonna Turusbekova

Background

Earlier and improved tuberculosis (TB) case detection - including smear-negative disease often associated with HIV - and expanded capacity to diagnose multidrug-resistant tuberculosis (MDR-TB) are global priorities for TB control. Alarming increases in MDR-TB, the global emergence of extensively drug-resistant TB (XDR-TB), documented institutional transmission, and rapid mortality in MDR-TB and XDR-TB patients with HIV co-infection have highlighted the urgency for rapid diagnostic methods.

Genotypic (molecular) methods have considerable advantages for scaling up programmatic management of drug-resistant and HIV-associated TB, offering speed of diagnosis, standardized testing, potential for high throughput, and fewer requirements for laboratory bio-safety. Since the development in the early 1980s of the polymerase chain reaction (PCR), the first and most familiar method to amplify nucleic acid sequences, molecular diagnostics have been widely expected to have a major impact on clinical medicine.

In December 2010, WHO endorsed the Xpert MTB/RIF assay and recommended that roll-out of the technology be phased in by country health authorities within the context of national plans for appropriate management of TB, MDR-TB and HIV-associated TB. A Global Consultation convened by WHO outlined consensus on interim diagnostic algorithms, patient management approaches, and operational/logistical aspects to be addressed during Xpert MTB/RIF implementation. These aspects are contained in a rapid implementation document, aimed at guiding systematic roll-out of Xpert MTB/RIF in varying epidemiological and resource settings, with a view towards large-scale implementation based on programmatic data collected during the roll-out phase.

Content of the session

The overall goal of the session is to provide participants with brief description of Xpert MTB/RIF, assay performance characteristics, and the potential impact on diagnostic access in different epidemiological and resource settings.

Methodology

- Plenary presentation of 30 minutes and about 10 minutes for discussion.
- Discussions in parallel working groups.
- Reporting of the working groups in the plenary and discussion.

Objectives

- Brief the audience on the development and technical characteristics of the Xpert MTB/RIF assay.
- Present the outcome of the Global Consultation with regard to the assay.
- Discuss the implementation of the Xpert and set priorities for the use in national TB programs in order to maximize early case detection of (MDR) TB.
- Discuss the interim diagnostic algorithms and operational considerations.

Expected outputs

Participants are informed about the Xpert MTB/RIF assay and have provided inputs on the interim diagnostic algorithms, positioning of the technology and actions to be taken for the rapid implementation the Xpert assay to maximize early case detection of (MDR) TB, while preserving a rational use of available resources and assuring quality care.

Time	Title of talk	Speakers/facilitators
11.15-11.55	Xpert MTB/RIF assay: outcomes of the Global Consultation, interim diagnostic algorithms and operational considerations	Fuad Mirzayev
11:55-12:00	Introduction to the working groups	Fuad Mirzayev
12.00-12.40	Discussion in parallel groups on: 1. Positioning of the Xpert MTB/RIF assay at different levels in healthcare/laboratory systems 2. Risk based assessment and diagnostic algorithms with the introduction of the Xpert MTB/RIF assay	Kristin Kremer Maia Kavtaradze
12.40-13.00	Feed-back in the plenary	Participants
13:00-14:00	<i>Lunch break</i>	

Thursday 26 May 2011

14:00 – 17:30

Session 5

Patient perspective in TB control issues

Coordinators:	Netty Kamp, Ogtay Gozalov
Chairpersons:	Maruschka Sebek, Wim VandeVelde
Reporter:	Ieva Leimane

Background

Civil society involvement into TB control is vital and essential for the success of the program. Without active participation of CSO community based care and effective expansion of the services are impossible. The role of the CSO's into advocacy and community mobilization is the priority for the European region. CSO are giving the patient a voice. Patient care does not only exist of the availability of adequate treatment but also of motivation and cooperation of the patients to achieve adherence. Both the patient and the nurse play an important role in TB care.

Growing problem of M/XDR TB raises a lot of ethical questions about equity of the services, necessity of introduction of the palliative care and system of hospices for the clinically severe cases. All ethical aspects in the palliative care are crucial for the management of chronic cases. WHO / Europe developed the consolidated plan to prevent and combat M/XDR TB, where palliative care and management of chronic cases are addressed.

Content of the session

1. Civil society involvement in TB control, prevention, care and monitoring/advocacy
2. Palliative care and management of chronic cases

Methodology

- Plenary presentations
- Discussion in working groups
- Reporting of the working group in the plenary and discussion

Objectives

1. To solicit remarks and suggestions from the participants on the civil society involvement and palliative care.
2. To discuss and draft ideas for proactive involvement of civil societies organizations and unify platform for palliative care approaches.

Expected outputs

- Participants have provided inputs and/or endorsed the actions to be taken for scaling up of civil society involvement in TB control, prevention, care and monitoring / advocacy as integral part of the activities.
- Participants have provided inputs on approaches, attitude, criteria and ethic aspects of palliative care and management of chronic cases

Time	Title of talk	Speakers/facilitators
14:00–14:15	Introductory video/slideshow	Adrienne Norman
14:15–14:30	Patient view	Iaroslav Zelinsky
14:30–14:55	Civil society: the route to Advocacy for TB action and to Enhancing TB Control through Community Awareness and Support	Paul Sommerfeld
14:55–15:10	What are the needs for palliative care for TB and MDR-TB patients?	Stephen Connor
15:10 -15:30	WHO policy on Palliative care in TB control	Ernesto Jaramillo
15:30–15:40	Introduction to the working groups	
15:40–16:10	<i>Coffee break</i>	
16:10–17:00	Working group discussion. How to ensure the perspective of people affected in the offer of care Civil society involvement in development of appropriate care Collaboration between NTP, NGO and local implementers to build the political and financial support	Ernesto Jaramillo Stephen Connor Wim Vandeveldde Paul Sommerfeld
17:00–17.30	Reporting back in the plenary	Participants

**Thursday 26 May 2011
18:30 – 20:30**

**Evening session
GFATM TB and HIV strategy consultation**

Detailed programme will be distributed at the registration desk.

Friday 27 May 2011

9:00 – 10:30

Session 6

TB control in Urban settings

Coordinators: Ibrahim Abubakar, Gerard de Vries
Chairpersons: Davide Manissero, Gerard de Vries
Reporters: Ieva Leimane

Background

During the last Wolfheze Workshops the topic Urban TB control was discussed in a plenary and three group discussions. In particular in low-incidence countries TB incidences in urban settings are several times higher than in rural areas due to the high proportion of legal and undocumented migrants from countries with a high incidence of TB, homeless persons, illicit drug users, etc. Urban TB control faces challenges to find cases early by active case-finding strategies and complete treatment in those identified to reduce TB incidence and transmission.

After the Wolfheze Workshop 2010 a group of TB experts and some other interested persons from EU Big Cities convened in Stockholm and agreed to start work on a consensus paper on TB control in European cities, to develop a forum to exchange ideas, and to jointly start research activities. Controlling TB in urban settings will have an impact on transmission, urban and national TB incidence.

Content of the session

1. Epidemiology of tuberculosis in big cities
2. Active case-finding activities to reduce TB transmission in big cities
3. Innovative approaches to complete treatment in difficult-to-treat risk groups

Methodology

- Presentations
- Group discussion in two groups
- Reporting back

Objectives

1. To provide feedback of the urban TB working group and the ECDC funded meeting on urban TB control (December 2010, Stockholm).
2. To give an overview of big cities in the European Region, TB incidences in these cities and the comparison with national TB incidences
3. To elaborate on effective urban case-finding and case-holding approaches, incorporating in the consensus paper.

Expected outputs

- Participants updated on TB control in Urban Settings the WHO European Region
- Participants have provided inputs for the draft consensus paper

Time	Title of talk	Speakers/facilitators
09.00 - 09.15	Introduction topic and report of Urban TB Control Meeting Stockholm 10 th December 2010.	Wouter Arrazola de Oñate
09.15 - 09.30	Overview epidemiology of tuberculosis in Big Cities	Gerard de Vries
09.30 - 10.10	1. Active Case Finding / targeted approach? 2. Case Holding / DOT program in Big City	Two short group sessions
10.10 - 10.20	Feedback of group sessions	
10:20 - 10:30	Future plans	Ibrahim Abubakar
10.30 - 10.45	<i>Coffee break</i>	

Friday 27 May 2011

11:00 – 13:00

Session 7

Pan European Cross Border TB Control

Coordinators : Pierpaolo de Colombani, Giovanni Battista Migliori
Chairpersons: Masoud Dara, Davide Manissero
Reporters: Einar Haldal

Background

The WHO European Region is facing increasing population mobility within and between sub-regional areas and with other regions. The recent events in Northern Africa have highlighted the urgency of discussing and agreeing on common interventions that health providers can advocate for and implement across borders. Migrants make no exception to the fundamental human right to health, and, according to our specific focus, to quality diagnosis, care and follow up for TB. As in some countries, denial of entry of suspected individuals is enforced, and, if the most vulnerable patients (e.g. asylum seekers or irregular migrants) are diagnosed with TB, they might face the risk to be extradited breaking the continuity of TB treatment with serious health risks for both the patient and the community at large. The Wolfheze 2010 called for a group of experts to discuss a minimum package of care and control of cross border TB: the draft concept paper "Cross border TB control and Care minimum package" has been prepared and will be presented for discussion during the NTP Managers Meeting / Wolfheze Workshop.

Content of the session

1. Different overviews of TB and migration in the WHO European Region
2. Draft concept paper on "Cross border TB control and care: the minimum package"

Methodology

- Presentations in plenary
- Discussion in plenary

Objectives

- To update participants on TB and migration in the WHO European Region
- To achieve consensus on the finalization of the concept paper and its implementation
- To agree on priorities for further collaboration and coordination

Expected outputs

- Participants updated on TB and migration in the WHO European Region
- Participants have provided inputs on the draft concept paper, which is endorsed
- Participants agree on priorities for future collaboration and coordination

Time	Title of talk	Speakers/facilitators
11.00 – 11.15	Migration and TB in the WHO European Region: IOM perspective	R. Petrova-Benedict
11.15 – 11.30	Field experience in TB control among migrants: achievements and constraints	Annalisa Rosso
11.30 – 11.45	Field experience in TB control among migrants: achievements and constraints	Lasha Gogvadze
11.45 – 12.00	Cross border TB control and care: the minimum package	Masoud Dara
12.00 – 13.00	Discussion in plenary with 2 objectives: 1. to endorse the concept paper 2. to agree on priorities for future collaboration and coordination	Masoud Dara, Davide Manissero

13:00 – 13:30

Closing session followed by lunch

