Roadmap to prevent and combat drug-resistant tuberculosis
Examples of best practice

Azerbaijan

The main medical department of the Ministry of Justice has been carrying out regular screenings for inmates and people on remand, starting from trial isolators in the framework of the TB control project in the penitentiary system. The compulsory diagnostic algorithm consists of a questionnaire and X-ray investigation. Sputum samples from suspicious TB cases are taken three times for microscopy and bacterial inoculation. Rapid diagnostic sensitivity tests are run routinely based on the latest diagnostic technologies. Suspected and/or confirmed cases of TB are immediately isolated in separate rooms and within several days (not later than a week) are transferred to a specialized treatment institution under the Ministry of Justice where all forms of TB, including drug-resistant TB, are treated. In this closed medical institution, treatment is available for all inmates and people under investigation without regard to sex, age, inside regime mode and conditions of punishment.

Estonia

Estonia has the second highest per capita alcohol consumption in the Region and there is a high prevalence of alcoholism among TB treatment defaulters and MDR-TB cases. In 2011, a demonstration project started with training of staff on AUDIT (alcohol use disorders identification test) and coordination between the national TB services and the psychiatric services offering counselling and treatment for alcoholism to patients undergoing treatment for TB.

Collaborative TB/HIV activities are being implemented, such as HIV testing of TB patients and TB screening among people living with HIV, co-treatment with anti-TB drugs, antiretroviral therapy and opioid substitution therapy if indicated, information for patients and training of doctors. These have resulted in earlier detection of both TB disease and HIV infection, a decreased default rate among HIV-infected TB patients and increased TB awareness among people living with HIV [19].