

Regional workshop on accelerating the uptake of the latest WHO guidance on the management of DR-TB in the African region

Every year around half a million people develop RR/MDR TB. RR/MDR-TB is a massive public health and societal burden. Currently implemented treatments are long (9-18 months) and have a combined treatment success rate of only around 60%. Latest WHO guidance is game-changing shorter, safer, all-oral and more effective for DR-TB treatment. Many countries are preparing and planning the introduction of the shorter regimen. Once these regimens are mainstreamed, only a minority of patients will still require 9- or 18-month treatment regimens e.g., children, pregnant women, and people with resistance to any of the BPaL based regimen drugs. If well-managed, wide-spread access to these new regimens will positively impact DR-TB treatment outcomes; if not well-managed, interruptions of treatment may lead to unfavourable individual treatment outcomes and the rapid occurrence of TB strains resistant to these regimens. Therefore, important conditions for the eventual success of the shorter regimen should properly be implemented in programmatic condition including proper diagnosis of TB and adequate safety monitoring. To accomplish this, countries will need to update their national guidelines, train clinicians and healthcare personnel, secure adequate financial and human resources, and initiate the procurement of the regimen components.

The ASCENT DR-TB project funded by Unitaid and implemented by KNCV Tuberculosis Foundation will collaborate with WHO AFRO regional office to co-organizing regional meeting, providing an opportunity for country representatives to share their experiences and discuss the ways of overcoming barriers to programmatic introduction. Lessons from the meeting would support countries create the conditions for successful scale up of the latest WHO guidance for programmatic use. At the same time prepare for any new treatment endorsement by WHO, raise awareness, capacity building, adjustments of guidelines, drug forecasting with an aim to ensure rapid and safe uptake of WHO recommended shorter regimens, as soon as possible after a (rapid) communication will have been published.

Understanding the important of successful management of TB in children and adolescents, the agenda will include updates of TB in children and adolescents. However, the focus is on accelerating the uptake of the shorter regimens for the management of DR-TB in Adults.

Aim and objectives:

Goal:

The primary goal of this workshop is to strengthen and facilitate the rapid and effective implementation of the latest WHO guidance on the management of drug-resistant tuberculosis (DR-TB) in the African region. By bringing together key stakeholders, experts, and representatives from participating countries, we aim to accelerate the adoption of evidence-based practices and enhance programmatic approaches to DR-TB control.

Objectives:

- Define the status/uptake of the programmatic introduction of the shorter regimens in the African region.
 - Common knowledge and understanding of the latest WHO Guidance on the management of DR TB and global support mechanisms for countries to access quality assured medicines, diagnostics, technical assistance, and funding.
 - Self-assessment by country on the programmatic introduction status, identify implementation gaps and define the country priorities.
 - Plans for actions required for full implementation of the latest WHO guidance on the management of DR TB in each country.
 - Improve the capacity of countries representatives and regional consultants on the technical details of the WHO guidance.
- **Expected Results**
- By the end of the workshop, we anticipate the following outcomes:
 - Increased awareness of the latest WHO guidance among participants.
 - Clear identification of country-specific priorities and gaps.
 - Agreed-upon action plans for accelerating the uptake of recommended treatment regimens and timelines.