Tackling co-morbidities for optimal gain: tuberculosis, diabetes, and NCDs

THE 46TH UNION WORLD CONFERENCE ON LUNG HEALTH

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Wednesday, 02 December 2015, 11:15 - 12:30

Ballroom East- CTICC

Type of session

Side-meeting

Track

TB and diabetes/TB and other non-HIV comorbidities

Track2 (optional)

Civil society / patient & community engagement

Description

Diabetes is estimated to be the cause of 15% of present tuberculosis cases, and is a commonly observed co-morbidity. Patients with diabetes and tuberculosis commonly manifest worse tuberculosis treatment outcomes and a higher risk of mortality than patients with tuberculosis alone. Furthermore, tuberculosis has shared risk factors with other NCDs, including tobacco use and alcohol use, and chemotherapy for cancer can increase risk of tuberculosis through weakened immunity. For effective care to be achieved, it is imperative to integrate care across care across diseases, both in terms of the absolute need for holistic, patient centred care, and also in terms of maximising the use of available health systems resources by building on platforms which already exist for care for chronic diseases. In low and middle?income countries, systems for managing HIV/AIDS are often much more advanced than for tuberculosis and NCDs and offer a clear opportunity for integrated care.

Target audience

- 1. Technical experts, healthcare professionals
- 2. Policy-makers
- 3. Patients and representatives from the civil society

Objectives

- 1. To set out how NCDs including cancer and diabetes are associated with increased risk of TB; and how TB and NCDs share risk factors including tobacco use and malnutrition
- **2.** To share opportunities to intervene at the level of prevention, focusing on the role of civil society in minimising exposure to shared risk factors as part of a broader multisectoral response
- **3.** To demonstrate the need to strengthen health systems for integrated treatment (e.g. early TB screening for people with diabetes; chronic care)

Keywords

Tuberculosis, diabetes, NCDs

Coordinator(s)

Priya Kanayson (USA), Maria Paola Lia (Switzerland)

Chair(s)

Knut Lonnroth (Switzerland)

Presentations

Evidence for the link between tuberculosis, diabetes, and NCDs Knut Lonnroth (Switzerland)

Considerations for integrated care across tuberculosis, diabetes, and NCDs Neeraj Kak (USA)

Patients at the centre of healthcare Carrie Tudor (USA)

Case study: integrated screening and care for TB, diabetes, and HIV in low income settings in Ethiopia Degu Jerene Dare (Ethiopia)