Session N.00440

12. Tuberculosis control in acute and chronic conflict

Saturday, 05 December 2015, 17:30 - 18:45

Room MR 2.61-2.63

**Type of session**  
Sponsored Satellite Symposium

**Track**  
TB in vulnerable and special populations

**Track2 (optional)**  
Advancing the End TB strategy and other policy issues

**Organised by**  
Medecins Sans Frontieres, Operational Center Amsterdam

**Description**  
Conflict, characterised by insecurity, population displacement and political uncertainty, acts to degrade the public health pillars on which TB control is built. The subsequent treatment vacuum leaves many without appropriate diagnosis and haphazard follow-up and care. No consensus has been reached on the delivery of TB and MDR-TB care in crisis settings, despite the need for pre-preparedness and adaptations to standard treatment models. A specific framework for the delivery of TB care in conflict settings is a necessary part of the TB elimination pathway set up by the new global TB strategy.

**Target audience**
1. National TB Programme managers and policy-makers
2. International organisations and donors involved in TB control
3. Professionals involved in TB care

**Objectives**
1. To present a framework for assessing needs and planning TB care in conflict settings
2. To highlight ethical dilemmas related to the tuberculosis care continuum in crisis
3. To present the results of the programmes offering TB and MDR-TB care in conflict-prone settings
4. To bring together TB care actors to address the best ways of offering TB care in conflict settings

**Keywords**  
Tuberculosis; conflict; framework

**Coordinator(s)**  
Anita Mesic (Netherlands)

**Chair(s)**  
Lucica Ditiu (Switzerland), Philipp Du Cros (UK)

**Presentations**

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<td>Ethical dilemmas for TB programmes in conflict settings</td>
<td>Sheather Julian (UK)</td>
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<td>7:40 - 7:50</td>
<td>Framework for TB care in conflict: case studies from Somalia, Central African Republic and South Sudan</td>
<td>Anita Mesic (Netherlands)</td>
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<td>7:50 - 8:00</td>
<td>DR-TB and TB/HIV challenges in Ukraine during military conflict</td>
<td>Slavuckij Andrej (Ukraine)</td>
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<td>MSF experience managing DR-TB and DR-TB/HIV patients in penitentiary system and after release during armed conflict in Ukraine</td>
<td>Nana Tsanava (Ukraine)</td>
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<td>Experiences with short MDR-TB regimen in unstable settings</td>
<td>Esther C. Casas (Netherlands)</td>
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<td>Surveillance and patient follow-up in displacement and situations of limited access due to security issues</td>
<td>Kathy Fiekert (Netherlands)</td>
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<td>Active case finding using community-based approach in South Sudan</td>
<td>Wadembere Ibrahim (South Sudan, Republic of)</td>
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<td>Challenges in supply chain management</td>
<td>Audib Khan (Pakistan)</td>
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