



XDR-TB: extensively drug-resistant tuberculosis

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Stop TB Department www.who.int/tb

DEATH OF XDR-TB AIR PASSENGER HIGHLIGHTS NEED TO IMPROVE CONTACT TRACING

An investigation into an air passenger with XDR-TB, who died 10 days after flying from Beirut to Paris, has highlighted the need for improved international coordination when carrying out procedures for contact tracing. A report in the December 2007 edition of [Eurosurveillance Weekly](#) showed that information required to contact passengers is not always available. Only 7 of the 11 passengers identified at risk of potential XDR-TB infection on the October 2006 flight have so far been located by investigators. The report points out that improved coordination in such cases would allow authorities to make joint risk assessments in situations involving severe TB, and to agree on relevant control measures. In May 2007, another case, this time involving an American citizen with MDR-TB who had travelled on a transatlantic flight to and across Europe, attracted media attention.

WHO Director-General calls for scale up of joint TB/HIV interventions

Dr Margaret Chan, in her [message](#) for World AIDS Day 2007, highlighted the need to scale up joint interventions that address the TB/ HIV co-epidemic: "Without access to antiretroviral therapy and proper TB treatment, most people living with HIV who develop tuberculosis will die quickly, sometimes in a matter of weeks. Effective joint interventions exist for TB and HIV, and these need to be scaled up in an integrated fashion to prevent these unnecessary deaths." Dr Chan's call is in line with objective 1 of the Global MDR-TB and XDR-TB Response Plan, which highlights the need to strengthen basic activities to control TB and HIV/AIDS, including the need to define appropriate responses to MDR-TB and XDR-TB in HIV policy and practice.

XDR-TB highlights for 2007

January – [WHO guidance on human rights and TB](#). In response to a public health article and news reports of XDR-TB patients defaulting on their treatment, WHO reissued recommendations that governments should ensure access by every TB patient to high-quality diagnosis and treatment. WHO pointed out that the serious threat posed by XDR-TB may warrant limiting individual human rights as a public health measure for patients who wilfully refuse treatment. However, this should be a last resort and justified only after all voluntary measures to isolate such patients have failed.

February – [WHO issues XDR-TB control progress report](#). WHO issued the first update on achievements aimed at addressing XDR-TB following the meeting of the WHO Global XDR-TB Task Force. The 20-page report outlined actions on eight agreed recommendations, listing over 80 activities carried out by WHO and partners in the four months since the Task Force first met.

March – [United States Congress told of global TB laboratory capacity crisis](#). US Congress members agreed to explore further support for global TB control efforts following a hearing by WHO Stop TB Director Mario Raviglione, who warned that "too many countries still don't have the means to detect MDR-TB."

May – [Investigations into USA XDR-TB air passenger](#). The United States Centers for Disease Control and Prevention and affected national authorities issued warnings to transatlantic air passengers who may have been at risk of XDR-TB infection from a fellow passenger. The issue highlighted the urgent need to prevent drug-resistant TB and the need for improved TB infection control.

June – [The Global MDR-TB and XDR-TB Response Plan 2007-2008](#). WHO and the Stop TB Partnership launched a two-year response plan to prevent hundreds of thousands of cases of drug-resistant TB. The plan, for 2007 and 2008, requires US\$ 2.15 billion, and outlines activities under eight strategic objectives.

July – [WHO Policy guidance on TB drug susceptibility testing of second-line anti-TB drugs](#). TB laboratory specialists meeting at WHO headquarters issued recommendations to guide national TB control programmes embarking on second-line anti-TB drug susceptibility testing.

September – [Sixth meeting of MDR-TB Working Group of the Stop TB Partnership in Tbilisi, Georgia](#). Delegates examined the progress and challenges to scaling up the management of MDR-TB. They endorsed a research agenda for MDR-TB control to accelerate efforts for new tools, and created a task force to urgently address the global crisis in the procurement of second-line anti-TB drugs.