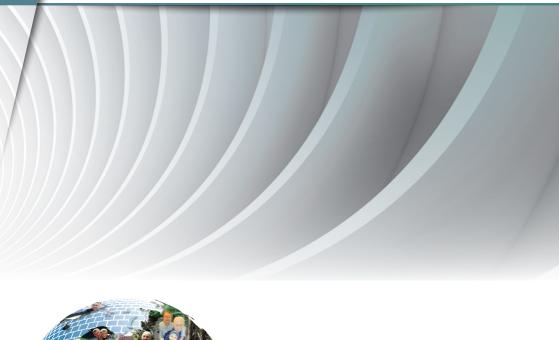


HEALTH EVIDENCE NETWORK SYNTHESIS REPORT 56

What constitutes an effective and efficient package of services for the prevention, diagnosis, treatment and care of tuberculosis among refugees and migrants in the WHO European Region? Themed issues on migration and health, VIII

Sally Hargreaves | Kieran Rustage | Laura B Nellums | Jaynaide Powis | James Milburn Santino Severoni | Masoud Dara | Soorej | Puthoopparambil | Jon S Friedland





The Health Evidence Network

The Health Evidence Network (HEN) is an information service for public health decision-makers in the WHO European Region, in action since 2003 and initiated and coordinated by the WHO Regional Office for Europe under the umbrella of the European Health Information Initiative (a multipartner network coordinating all health information activities in the WHO European Region).

HEN supports public health decision-makers to use the best available evidence in their own decisionmaking and aims to ensure links between evidence, health policies and improvements in public health. The HEN synthesis report series provides summaries of what is known about the policy issue, the gaps in the evidence and the areas of debate. Based on the synthesized evidence, HEN proposes policy options, not recommendations, for further consideration of policy-makers to formulate their own recommendations and policies within their national context.

The Joint Tuberculosis, HIV and Viral Hepatitis programme

The Joint Tuberculosis, HIV and Viral Hepatitis (JTH) programme aims to improve tuberculosis, HIV and viral hepatitis prevention and care in the WHO European Region through ensuring equal access to safe and adequate health services, providing relevant epidemiological surveillance, including laboratory services and networks, and building technical capacity to reduce barriers and boost uptake of effective tools. JTH supports Member States in developing and implementing evidence-informed interventions, and in operational research, assessing the burden of disease regularly and monitoring progress towards ultimate disease elimination.

The Migration and Health programme

The Migration and Health programme, formerly known as Public Health Aspects of Migrants in Europe (PHAME), was established in 2011 to support Member States to strengthen the health sector's capacity to provide evidence-informed responses to the public health challenges of refugee and migrant health. The programme operates under the umbrella of the European health policy framework Health 2020, providing support to Member States under four pillars: technical assistance; health information, research and training; partnership building; and advocacy and communication. The programme promotes a collaborative intercountry approach to migrant health by facilitating cross-country policy dialogue and encouraging homogeneous health interventions along the migration routes to promote the health of migrants and refugees and protect public health in the host community. This is the eighth report in themed issues on migration and health. Previous migration and health issues (HEN synthesis reports 42–47 and 53) are available at http://www.euro.who.int/en/health-topics/health-determinants/migration-and-health/publications/health-evidence-network-hen-synthesis-reports.

Health Evidence Network synthesis report 56

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Abstract

The WHO European Region has faced high rates of external and internal migration in recent years, with concerns that this is contributing to the burden of tuberculosis (TB), multidrug-resistant TB (MDR-TB) and TB/HIV coinfection in some countries. This report examines evidence of effective and efficient service packages for the prevention, diagnosis and treatment of TB to inform strategies to address the TB burden in refugee and migrant populations. Significant regional variations were identified in both migration levels and TB burden in refugees and migrants, as well as in approaches to TB control, with low quality of evidence in many cases. While it is unlikely that a single strategy/package will be effective for all situations, the evidence highlights some common approaches that could guide policy-making and service development. TB elimination targets for the Region will not be met unless inequalities in access to screening and treatment for migrants are addressed, alongside efforts to tackle TB globally.

Keywords

TUBERCULOSIS – DIAGNOSIS, PREVENTION AND CONTROL; TUBERCULOSIS, MULTIDRUG-RESISTANT – DIAGNOSIS, PREVENTION AND CONTROL; LATENT TUBERCULOSIS; REFUGEES, TRANSIENTS AND MIGRANTS; PROGRAM EVALUATION; EUROPE

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CONTENTS

Abbreviations	iv
Contributors	v
• Summary	viii
 Introduction I.1 Background I.2 Methodology 	1
 2. Results 2.1 Prevention 2.2 Diagnosis and detection 2.3 Treatment and care 2.4 Cross-border collaboration: what works? 2.5 Operational issues 	
 3. Discussion	
▶ 4. Conclusions	40
▶ References	41
Annex 1. Search strategy	56

ABBREVIATIONS

BCG	Bacillus Calmette–Guérin
CXR	chest X-ray radiography
DOTS	directly observed treatment, short-course
ECDC	European Centre for Disease Prevention and Control
EEA	European Economic Area
EU	European Union
IGRA	interferon-gamma release assay
IOM	International Organization for Migration
LTBI	latent tuberculosis infection
MDR-TB	multidrug-resistant tuberculosis
ТВ	tuberculosis
TST	tuberculin skin test

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