

WHO INFORMATION NOTE
ON ENSURING CONTINUITY
OF ESSENTIAL TUBERCULOSIS
SERVICES FOR PEOPLE WITH
OR AT RISK OF THE DISEASE
WITHIN UKRAINE AND IN
REFUGEE-HOSTING
COUNTRIES



The World Health Organization (WHO) is deeply concerned for the well-being of the people of Ukraine: as a result of the armed conflict, population access to essential health care services is severely impacted (1) By late April 2022, more than 7.7 million people were internally displaced (2) and nearly 6 million people fled Ukraine into countries neighboring Ukraine and beyond (3). Around 90% of the current refugee population are women and children (4).

WHO is working closely with Ukraine, countries hosting refugees, affected populations and partners<sup>1</sup> to rapidly respond to the humanitarian crisis caused by war and minimize disruptions to the delivery of critical health care services (5). As part of these overarching efforts, WHO is working to enable access to TB care services for all people with or at risk of TB within Ukraine and in refugee-hosting countries.

# IMPACT OF WAR IN UKRAINE ON INDIVIDUALS MOST AT RISK OF TB AND PEOPLE WITH TB

In a humanitarian crisis, populations face significant threats to health and survival, including poverty, crowded living conditions, undernutrition and poor access to health care. These conditions predispose people to an increased risk of acquiring TB, particularly those who are household contacts of TB patients (esp. children under five years of age), people living with HIV, and people with immunodeficiency conditions.

Individuals most at risk of TB and people with TB face additional challenges and risks:

- limited access to and delays in TB diagnosis, undiagnosed and untreated TB especially multidrugresistant TB (MDR-TB) that could lead to serious consequences including much lower chances to be cured of TB, development of additional drug-resistance (amplification) and transmission of infection to contacts;
- limited access to or disrupted access to medicines, drug safety monitoring, and adherence support and post-treatment follow-up for TB and MDR-TB that could worsen health outcomes;
- limited access to and interruptions of TB preventive treatment services, which could increase the risk of progression from TB infection to disease; and
- inadequate access to vaccines for other diseases, such as the coronavirus disease.

<sup>&</sup>lt;sup>1</sup> These include International Non-Governmental Organizations, International Organizations, and Non-Governmental Organizations.

The COVID-19 pandemic further exacerbates the situation of those vulnerable due to conflict. While experience on COVID-19 co-infected TB patients remains limited, people who have both TB and COVID-19 may have poorer treatment outcomes (6), especially if TB treatment is interrupted. Also, people with chronic conditions, such as diabetes mellitus, chronic obstructive pulmonary disease, risk having more severe COVID-19 and poorer treatment outcomes from TB (7).

## WHO'S SUPPORT TO THE TB RESPONSE IN UKRAINE AND IN REFUGEE-HOSTING COUNTRIES

WHO is working closely with health authorities in Ukraine and refugee-hosting countries, United Nations (UN) agencies, and other partners<sup>2</sup> to ensure access to health services for people in Ukraine and refugees in host countries (5).

Concerning TB, WHO efforts are focused on ensuring equitable access to (and continuity of) TB services for screening, diagnosis, prevention, treatment and care.

Under the overall leadership of the national TB programme in Ukraine, procurement and supply of TB medicines are closely monitored, and procurement needs identified. Given the changing security situation, options to ensure uninterrupted access to treatment for TB and TB infection are continuously re-examined. The current grant and the emergency funding of the Global Fund to Fight AIDS, Tuberculosis and Malaria is being drawn upon to cover costs for procurement and supply of TB medicines and other health products to Ukraine. Procurement is facilitated by the Stop TB Partnership's Global Drug Facility (GDF). WHO continues providing technical support to the national TB programme on implementation of latest WHO recommendations on TB prevention, diagnosis, treatment and care.

To ensure continuity of TB services across borders, a rapid response group has been established under the aegis of the WHO Regional Office for Europe. Other key WHO actions include but are not limited to the following:

- monitoring of the TB situation in Ukraine and refugee hosting countries;
- a tool has been developed to estimate the burden of TB among refugees from Ukraine and made available to Member States to support resource planning in host countries;
- neighboring countries have been sensitized to the needs of refugees with TB and people vulnerable to TB via information briefs;
- technical support on all aspects of TB prevention, diagnosis, treatment and care is provided through regular interactions with cross-border TB focal points;
- work continues with Member States in the European Region and relevant institutions to overcome challenges in accessing certain medicines for the treatment of both drug susceptible and drugresistant TB);
- work to ensure access to and availability of TB medicines;
- resources for the procurement of TB medicines and diagnostics in host countries are also directly being mobilized by WHO;
- TB patient data exchange mechanism of the cross-border TB prevention and control framework of the WHO European Region (8);

<sup>&</sup>lt;sup>2</sup> These include International Non-Governmental Organizations, International Organizations, and Non-Governmental Organizations.

- the European Test Finder (9), a web tool aimed at facilitating people's access to testing sites, has been expanded to include information on TB treatment sites; and
- partnering with and engaging civil society and community organizations in providing TB related services (including psycho-social support, community-based care, community-lead monitoring to identify barriers to accessing services, support continued access to services, etc.) to refugees in hosting countries through the WHO Europe Regional Collaboration Committee on TB, HIV and viral hepatitis (RCC-THV).

#### WHO HEALTH EMERGENCY APPEAL FOR UKRAINE

WHO has published an appeal outlining the health needs and related costs arising from the crisis-including for diseases such as TB. The Emergency Appeal - powered by the WHO Foundation - raises funds for WHO's frontline response to deliver life-saving medicines and supplies, and to support the healthcare workforce to help people affected by this crisis across Ukraine and in neighboring countries. <a href="https://www.ukraine.who.foundation/">https://www.ukraine.who.foundation/</a>

# COLLABORATIVE EFFORTS NEEDED TO ENSURE SUSTAINABILITY OF ESSENTIAL TB SERVICES FOR ALL PEOPLE WITH TB OR AT RISK OF TB IN UKRAINE AND FOR REFUGEES

It is recognized that in a humanitarian emergency, TB services may initially need to be refocused on emergency interventions (10). However, the overall goal needs to remain ensuring full and equitable access to (and continuity of) TB services for prevention, diagnosis, treatment and care free of charge and free of stigma and discrimination, (11). At country level, national TB programme staff are well placed to lead and coordinate the response to TB given their experience and capacity.

- **Prevention:** Measures should be taken to limit airborne transmission of infections such as TB and COVID-19 in congregate settings and health care facilities. TB preventive treatment services should be maintained. TB disease is not a contraindication for COVID-19 vaccination (7).
- Screening: In Ukraine, screening for TB disease should be performed and TB preventive treatment should be provided as recommended by WHO guidelines. Compulsory screening of refugees is not recommended.
- **Diagnosis:** Access to molecular diagnostic services is essential, and all patients diagnosed with TB should be tested for drug-susceptibility as a standard of care.
- Treatment and care: Provision of TB treatment, in line with the latest WHO guidelines, must be ensured for all TB patients. The use of all-oral treatment regimens for drug-resistant TB is particularly important in situations like these, where regular in-person support of patients by healthcare workers may be compromised. People-centered outpatient and home/community-based care should be strongly preferred over hospital-based treatment (unless serious conditions require hospitalization) (12). Use of digital technologies, as per WHO guidelines, should be intensified to support patients and programmes, including use of electronic systems to ensure timeliness of TB data, digital adherence technologies (including video-supported TB treatment), telemedicine and eLearning among others.

- Within Ukraine, given the current context, adequate stocks of TB medicines should be provided to all patients to ensure treatment completion.
- **Procurement and supply management:** Appropriate planning, monitoring, and coordination are essential to ensure that procurement and supply of TB medicines and diagnostics are not interrupted.
- **Psychological and social support:** ensuring psychological and social support is essential to meet needs of TB patients, to facilitate completion of treatment and treatment outcomes.

## WHAT KEY TOOLS ARE AVAILABLE TO HEALTH AUTHORITIES, PARTNERS, CIVIL SOCIETY AND OTHER STAKEHOLDERS

- 1. Tuberculosis Prevention and Care Among Refugees and Other Populations in Humanitarian Settings: An Interagency Field Guide (10): The guide focuses primarily on managerial/organizational aspects of TB interventions and provides links to the most updated references for the clinical aspects.
- 2. **WHO TB Knowledge Sharing Platform** (13): This platform provides easy access to latest WHO TB guidelines, the operational handbook on tuberculosis and a catalogue of training materials. Content can be accessed via computer and on a smart phone.
- 3. WHO comprehensive, self-paced, and free online courses aimed at facilitating the rapid uptake of WHO guidelines on rapid diagnostics for TB detection, drug-resistant TB treatment, and TB preventive treatment (14): E-courses are presently hosted in The End TB Channel in OpenWHO platform.
- 4. **WHO Information Note, COVID-19: considerations for tuberculosis (TB care)** (7): This Information Note is intended to assist national TB programmes and health personnel worldwide to maintain essential TB services during the COVID-19 pandemic and in the recovery phase.
- 5. **The European framework for cross-border TB prevention and control** (15): This article discusses the minimum package for cross-border TB control and care in the WHO European Region.
- 6. **The European Network of cross-border TB prevention and control** (16): Overview of contact details of countries' focal points for TB in migrants.
- 7. **Cross-border TB data exchange workspace** (8): This is a virtual platform for collaboration on transfer in/out across the borders following 3 core scenarios: diagnosis, treatment, and contacts tracing.
- 8. **WHO Europe Virtual Medical Consilium on DR-TB**:<sup>3</sup> This consilium can provide expert opinion on difficult clinical case scenarios and support with capacity building.
- 9. **The European Test Finder** (9): A web tool aimed at facilitating people's access to treatment sites.
- 10. Information note: Testing for tuberculosis infection and screening for tuberculosis disease among refugees arriving in European countries from Ukraine (17): This document provides an overview of public health guidance on testing for TB infection, TB preventive treatment and screening for TB disease, in the context of the mass influx of people arriving in European countries from Ukraine.

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<sup>&</sup>lt;sup>3</sup> For more information please contact: <u>mstrconsilium@who.int.</u>

## Acknowledgements

This information note was developed jointly by the WHO Global Tuberculosis Programme in collaboration with the WHO Regional Office for Europe and WHO Country Office for Ukraine in April 2022.

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