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Hard-to-cure TB is spreading with ease

Cases involving multi drug-resistant strains of tuberculosis are on the rise globally. Health experts find that the lack of proper monitoring systems to ensure continuity of treatment is a major reason for this, writes GILLIAN WONG

THE Beijing Chest Hospital was packed with people on a recent weekday morning. In the waiting area, Wang Chong, a migrant worker who has been fighting tuberculosis for several months, was facing a dilemma: does he continue treatment that has already cost him more than US\$5,000 (RM17,000) or stop before his savings are wiped out?

It's not only his health that is at stake. If Wang stops treatment prematurely, his tuberculosis is likely to morph into one of the new, harder strains that resist the drugs he has been using and that pose a growing threat to global public health. Countries as diverse as China, Russia and South Africa are vulnerable, and the new strains have also appeared in the United States.

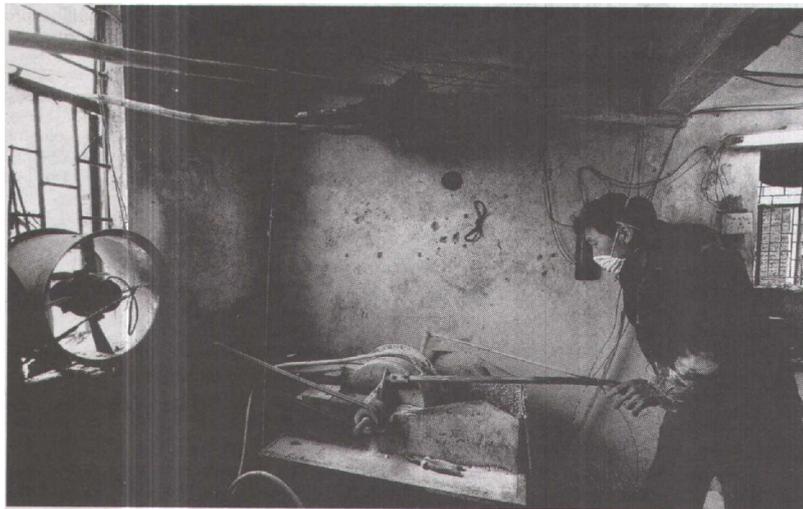
"TB is now taking on a deadly new form — one that will spread further," said Cornelia Hennig, the World Health Organisation's TB programme coordinator for China. "We can choose: either we act now with rational and proven approaches, or we pay later with a worsening epidemic."

The WHO is trying to bring renewed vigour to the fight with a three-day meeting of health ministers from the worst-affected countries in Beijing starting tomorrow.

Also attending are WHO director-general Margaret Chan and Bill Gates, co-chair of the Bill & Melinda Gates Foundation, a major contributor to research on global health problems. Countries are expected to draw up five-year plans to prevent and control the spread of drug-resistant TB.

TB is caused by germs that spread when a person with active TB coughs, sneezes or speaks. It's ancient and treatable but now has evolved into stronger forms: multidrug-resistant TB, which does not respond to two top drugs, and extensively drug-resistant TB, which is virtually untreatable. TB is usually treated in six months with a US\$20 cocktail of four antibiotics, but its drug-resistant form takes up to two years to fight.

One of the culprits: health-care systems that lose track of



A worker at a gemstone factory in Guangdong province. Guangdong, home to most of China's export factories and to many migrants, has more tuberculosis infections than any other province in that country. — Reuters picture

patients who do not complete their courses of treatment, allowing the TB bacteria to develop resistance to normally potent medicines.

This is also a problem in India, where rural healthcare is often poor and there is little control over the sale of anti-TB drugs; Russia, which faces a shortage of qualified medical staff and drugs; and South Africa, where the disease thrives amid an AIDS epidemic that has weakened the immune systems of people with HIV.

An estimated half-a-million people in the world are already infected with drug-resistant TB, nearly a quarter of them in China. Most are still waiting for help, which only increases the risk.

Less than five per cent of people suffering from drug-resistant TB worldwide were properly treated, said Mark Harrington, executive director of Treatment Action Group, a US-based health advocacy group.

"So most of the people are going around coughing and spreading multidrug-resistant TB," he said.

"But most countries have not yet started to take it seriously."

Though the problem is mainly confined to developing coun-

tries, health experts warn the risk is widespread as people and their diseases cross the globe.

An intercontinental scare was set off two years ago when an American lawyer with drug-resistant TB flew to several countries and back to attend a wedding.

In the United States, even as TB rates fall, drug-resistant strains are showing up in California and other states with large immigrant communities, because many people come from or travel frequently to countries such as Mexico, India and China where TB is a greater risk.

International experts recommend that TB treatment centres monitor their patients rigorously, supplying them with medication and watching them swallow every dose.

In the past decade, China made marked progress in fighting tuberculosis, which until last year was the most fatal infectious disease. Once a person tests positive for TB at a hospital, an Internet-based reporting system helps health officials channel the infected patients to special TB facilities run by the communicable diseases agency.

The Health Ministry says

more than 90 per cent of new infections are cured every year. But China still has 112,000 people with drug-resistant TB, according to the WHO. Experts say only a few thousand of them are receiving proper treatment.

An underfunded healthcare system means many TB facilities can't closely track every patient, while most of the 130 million highly mobile migrants from rural China don't qualify for free treatment given to urban residents.

Guangdong province, where most of China's export factories are located and home to many migrants, has more TB infections than any other province.

China was developing an electronic system to track infected migrants, the WHO's Hennig said. The government had also promised revamping of healthcare with a US\$124 billion investment over the next three years.

The Health Ministry says it is working on a national survey of drug-resistant TB patients and plans to roll out treatment to them, but did not say when. It said treating drug-resistant TB is a hundred times more expensive than normal TB. — AP