

WHO REGIONAL COMMITTEE FOR EUROPE

65th Session

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Agenda item 5 (f). Final report on implementation of the Consolidated action plan to prevent and combat multidrug- and extensively drug-resistant tuberculosis in the WHO European Region 2011-2015 and consideration of the proposed Tuberculosis action plan for the WHO European Region 2016-2022.

Italy aligns itself to the EU and Member States' position on the matter.

As addressed by Slovakia and the UK, I am sorry to keep on insisting that the current (and future) unprecedented population moves call for a specific action to be captured also by the TB agenda, as migrants may be vectors and can become victims of TB.

Frontline rapid screening procedures on arrival should be devised and adopted and specific guidelines produced. Joint referral procedures and cross-border management of suspected TB patients for clinical assessment and laboratory diagnosis should be addressed and a consensus among Member States' reached.

We must build a standard and shared information system and Italy welcomes the platform proposed by the Regional Office.

My personal experience in containing the largest MDR/XDR TB outbreak ever at the COSH, in KZN, South Africa, tells that we must put in place an information driven active case and contact finding system. Without an exchange of information following patients on route we may fail.

Several such patients not only come from the East, but also from the South, possibly from high HIV prevalence areas.

These individuals are very vulnerable and exposed to catch TB during their trip as well as on arrival, if not already carrying the dual infection.

Even if diagnosed and put under treatment, they may be likely to continue their travel, joining their relatives and/or community members.

May I strongly recommend that we include this dimension into the action plan more explicitly or that, alternatively, we keep TB dimension very high in the incoming migrants' health discussion.

Italy has recently proposed the HQ TB programme to work jointly on the matter.

Thank you, Chair.