

# Brazil: TB context

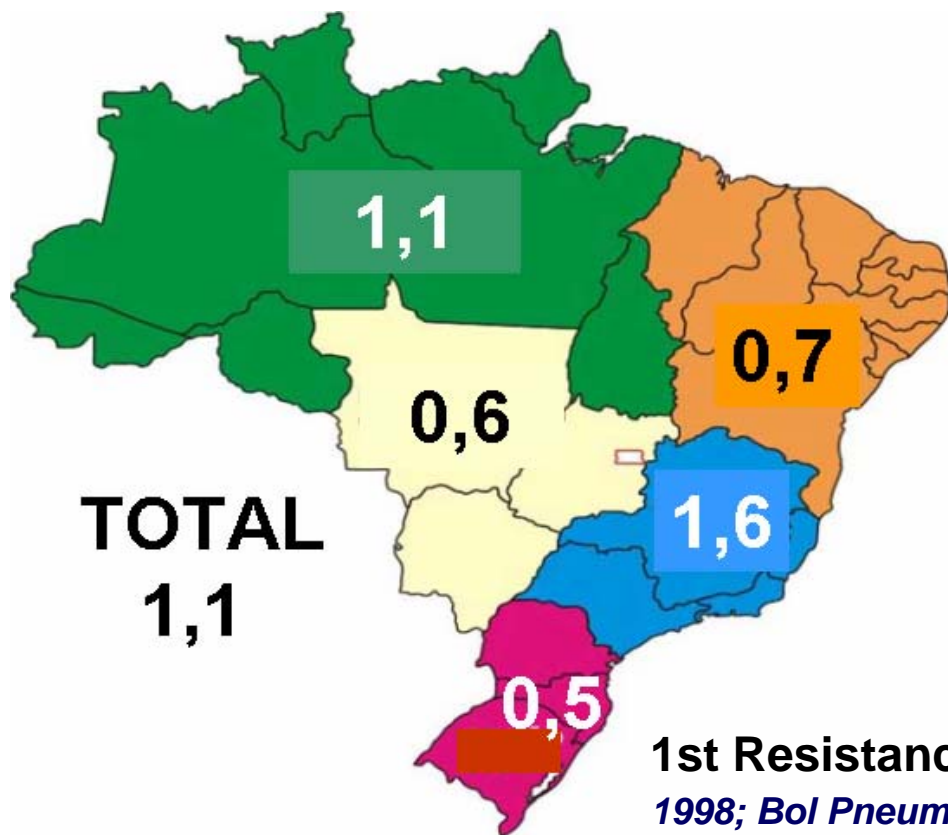
- ❑ Population : 184 Million
- ❑ Size : 8 547 403 Km<sup>2</sup>
- ❑ Number of states : 27  
(including federal district -  
(5 561 districts – 40 081 health units)
- ❑ Life Expectancy : 70 years
- ❑ GDP per capita : 7790 US \$
- ❑ TB : 16<sup>th</sup> / 22 high burden countries
- ❑ 82% population living in urban area
- ❑ 86 000 cases/year
- ❑ TB/HIV co-infection 10-12 %
- ❑ 2RHZ/4RH Cat 1 – National Guidelines 100 % adopted
- ❑ All drugs free of charge to patient– not available in private sector



# MDRTB Situation

MDRTB incidence (100,000 inhab.)  
2500 cases reported to the MoH Epidemiological Surveillance System (SINAN) - 2000 as of October 2006

700 cases currently on treatment  
XDR < 2% (under revision)



## Standard treatment regimen :

- 18 months duration
- 4 oral drugs - 18 mo
- 1 injectable first 12 mo

### Regimen

Amicacin  
Ofloxacin  
Terizidon  
Ethambutol  
Clofazimine  
(till March 2005)  
Pyrazinamide

1st Resistance survey - 1995-97 *CRPHF / MS, Final Report, 1998; Bol Pneumo Sanit, 2000; Braga JU et al. NEJM 1998*

2nd Resistance survey on-going 2006-2007

# What is needed : priorities

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- 100% DOTS coverage for Health Units of 315 prioritarian municipalities
  - Produce FDCs: R+H+Z & pediatric formulations by state producers
  - Strengthen implementation of culture and DST
  - Strengthen MDR TB monitoring and include all re-treatment cases in new DMIS
  - Improve efficacy of re-treatment & MDRTB regimens
  - Participate in multicentric clinical trials
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