

## Toward a TB-Free India

Quarterly Update

### A note from the U.S. Ambassador to India Richard R. Verma

On a cool March evening, I invited five brave TB survivors to the U.S. Embassy in Delhi to tell their stories: Amitabh Bachchan, the eminent Indian actor and Brand Ambassador for the Call to Action for a TB-free India, driving home the message that TB can happen to anyone; Deepti Chavan, who fought multi-drug resistant TB (MDR-TB) for six years and now serves as an advocate for patients and survivors; Kiran Tailwal, who had to depend on the kindness of a stranger to get the nutrition she needed to get well; Lalita Shankar, a public health specialist who couldn't imagine getting TB, until the disease spread to her bones; and Blessi Kumar, who struggled to get an accurate TB diagnosis and now works across the globe to make sure other patients don't have to face the same challenge.

Their testimonies were a powerful reminder of why the fight to end TB in India is so important, and why we must all work together to reach every person infected with TB, help cure them through timely treatment, and prevent new TB infections. These past few months have seen significant strides forward in our partnership with the Government of India (GOI) to champion a TB-free nation. But the burden of TB still looms large, in India and across the globe. So in the wake of World TB Day, I ask: What's next?

India and the U.S. are natural partners with a long history of collaboration on TB prevention and research. Our challenge is to continue to expand that partnership and deepen our collaboration even further. To do so we must push for continued innovation and novel approaches to TB prevention, diagnosis and treatment. We must continue to reach out to stakeholders from all corners and form a united front against TB, a disease we know is curable.

But most importantly, we must continue to remember the victims and survivors, whose stories will guide our way forward. We will continue to design interventions and outreach campaigns that recognize each patient as an integral part of the solution. We need to encourage healthcare providers to adopt and implement best practices and standards for the prevention, detection and treatment of TB. And we need to raise awareness and change attitudes about TB, so that patients seek treatment and receive care as soon as possible. With patients like Deepti, Lalita, Kiran, Blessi, and Mr. Bachchan, we'll not only know where to focus our efforts, but where to find inspiration on the road ahead.



### Developing Systems for Laboratory Quality Management

The Revised National TB Control Program (RNTCP) has a well-developed laboratory network for TB diagnosis, including designated microscopy centers for the examination of patient sputum, cartridge-based nucleic acid amplification testing (CB-NAAT), and drug susceptibility testing, all of which accelerate diagnosis. To strengthen this network, U.S. Centers for Disease Control and Prevention (CDC) will partner with the Foundation for Innovative New Diagnostics (FIND) to support the Central TB Division of India in developing an external quality assurance program for CB-NAAT laboratories. CDC will train staff from the National Reference Laboratories to produce panels for labs to validate their CB-NAAT results. Any discrepancies will help the team pinpoint areas in the lab system that need to be strengthened or repaired, from sample handling to the GeneXpert machine itself.

# Championing a TB-Free India

## Hinduja Hospital Convenes Discussions for a TB-free India

With support from the National Institutes of Health (NIH), India's P.D. Hinduja Hospital (PDHH) convened global TB experts and stakeholders at a workshop on April 23-24 to discuss furthering TB research, which is critical to stopping the current TB pandemic. PDHH pioneered the characterization, diagnosis and treatment of drug resistant TB, and is a sentinel institution to advance research and clinical strategies to improve treatment outcomes. The workshop reviewed best practices in TB management, prevention strategies, and structural interventions for improved case-finding and treatment. In addition, PDHH signed a Letter of Intent with the NIH and India's Division of AIDS (DAIDS) at the workshop. DAIDS and NIH will provide technical advice and expertise to assist PDHH in undertaking clinical research capacity building and training for infectious and chronic diseases.

## Call to Action Launches Radio and Social Media Campaign on World TB Day

GOI and the World Health Organization (WHO) South East Asia Regional Office commemorated World TB Day in New Delhi along with TB experts, TB survivors, donors, advocates and public supporters. Health Minister J.P. Nadda took the opportunity to launch new technical and policy guidelines, as well as a USAID-funded audio and social media campaign hosted by Mr. Amitabh Bachchan. Minister Nadda highlighted initiatives to improve detection and treatment, including 500 new CB-NAAT machines, the initiation of the drug Bedaquiline, and the release of third-line Anti-Retroviral Therapy for Persons Living with HIV.



## Understanding Drug-Resistant TB Transmission

Drug resistance to TB can either be acquired through inadequate treatment with first-line TB medications or when it is passed on from a person with drug resistant TB. Understanding how much transmission plays a role in the drug-resistant TB epidemic in India is key to developing effective strategies to control it. For this, India's National Institute of Research in Tuberculosis (NIRT) and CDC will initiate a series of studies to genetically sequence or "fingerprint" each strain of drug-resistant TB in Chennai, allowing researchers to understand exactly which cases of TB are related. These clusters of related cases will then be investigated to identify potential transmission sites and risk factors. These studies will allow us to better understand drug-resistant TB transmission and develop appropriate strategies to reduce drug-resistant TB.

## REACH Lilly MDR-TB Partnership Media Award 2016

On March 22, Resource Group for Education and Advocacy for Community Health (REACH) and Ely Lilly co-hosted an annual awards function to recognize excellence in TB journalism. A 12-month fellowship was awarded to a journalist to pursue reporting on factual TB episodes, patient struggles and suggestions for systems strengthening. USAID Mission Director, Ambassador Jonathan Addleton, shared his experiences as a writer and journalist, and recognized the vital role that the media plays in creating awareness about TB in India. The event drew participants from the GOI, Stop TB Partnership, Global Coalition for TB Advocates, and the media.



## Corporates join the Call to Action for a TB-free India campaign

We would like to recognize the new supporters. Five corporate houses -- National Thermal Power Corporation, DLF Foundation, TCI Foundation, Jubilant Bhartia and Johnson & Johnson -- announced commitments amounting to approximately \$3,000,000 to implement TB workplace interventions targeting mines, prisons, truck drivers, migrant workers, urban slums, construction workers and the rural community. India's National Association of Software and Services Companies (NASSCOM) Foundation supported the national campaign by hosting a number of TB panel discussions and called upon IT companies to join the campaign. Radio Mirchi 98.3 FM entered into a partnership with the Union to share messages of TB survivors and raise awareness in Delhi and Mumbai. The messages will accompany radio messages from Amitabh Bachchan on treatment and prevention of TB.

Join the TB Free India Campaign at <https://www.facebook.com/ForTBFreeIndia>

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