

Dear colleagues:

Please accept our most sincere congratulations on your 25th Anniversary.

We are proud to be one team with you!

Wishing you all a lot of success,

Your Russian team.



Мы можем ликвидировать ТБ
Мы должны ликвидировать ТБ
И мы ликвидируем ТБ



Город без Туберкулеза: Владимир

Highlights to share: Russia

URL: <https://pih-rf.ru/news>

Russia has long struggled with some of the highest burdens in the world for tuberculosis (TB) and its more severe, drug-resistant variants.

In 1998, Partners In Health began working in Tomsk and established a long-term program to decrease incidence and mortality rates for MDR-TB. Eventually, PIH's services scaled up to involve five additional Russian regions. The main focus was to address the structural and social challenges associated with TB and to enhance the access to treatment and care for people affected by TB and its drug-resistant forms.

After a transitional period of several years, PIH has now revived its work in Russia through the participation in the Zero TB Initiative, a global effort to eliminate TB in key regions as part of the World Health Organization's goals to drastically reduce TB incidence and mortality worldwide by 2035. PIH's participation in Russia now is centered in the city and oblast of Vladimir, east of Moscow.

Our goal is to improve the access to health and social care services by supporting most vulnerable and disadvantaged populations

TB Detection and Treatment

PIH's work with the Zero TB Initiative aims to rapidly reduce TB incidence and mortality in Vladimir by preventing the development of active disease in people with latent infection, early detection and effective treatment, and patient-centered approaches to TB care.

Nongovernmental organization Center for Partners in Healthcare “Zdorovye.ru”, as PIH is currently known in Russia, uses video-observed treatment and mobile health care teams to reach patients in their homes and communities. Our goal is to enhance the access to health and social care services by supporting most vulnerable and disadvantaged populations.

PIH and its partners have been making great strides in the region in addressing MDR-TB and its more severe variant, extensively drug-resistant TB (XDR-TB). PIH supports training for specialists and access to preventative therapy, using WHO-recommended treatment regimens.

PIH-supported teams provide preventive therapy for people who are at risk for MDR and XDR-TB at TB clinics. We deliver care through mobile teams who visit patients and communities, and facilitate the scale-up of Video Directly Observed Therapy (VDOT) by healthcare personnel and community healthcare workers.

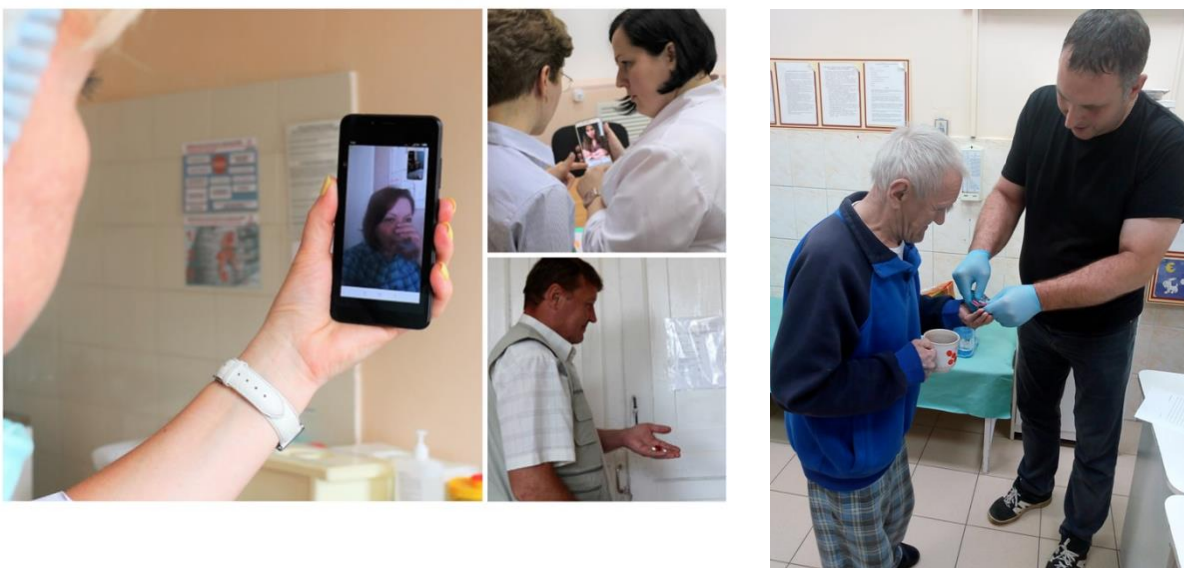
PIH’s work in Vladimir focuses on population groups who are the most vulnerable to TB: people exposed to others with active TB; people living with HIV or suffering from other immunity disorders; people who are homeless; and people with high occupational risk of tuberculosis, such as health care and prison workers.

A Lasting Model

Throughout the years, PIH’s work in Russia to provide and support TB care in some of the most remote and destitute regions or districts has proven to be a model for what is achievable when patients are adequately supported on their journey to healthy lives.

Delegations from almost all former Soviet Union countries have visited Tomsk to learn best practices and exchange information. Tomsk has become the training site for many TB practitioners through many partnerships, including with the World Health Organization Regional Office for Europe. PIH projects in Russia have been referenced in numerous WHO publications. Based on the successful experience of the Tomsk program, PIH continues to build partnerships with local governmental and non-governmental organizations, facilitate training for medical professionals and community healthcare workers, and provide our patients with the best possible patient-centered care.

Our activities



Directly observed and video observed treatment. Center for Specialized Phthisiopulmonary Care. Vladimir Region, Russia.



***Training on TB prevention and care for healthcare providers, held recently at the Center for Specialized Phthisiopulmonary Care, Vladimir Region, Russia.
Photo by: Alexandra Solovyova, Project Manager***

Our Impact

In 2021, our project in Vladimir Oblast has been included in the WHO guide [“Programmatic innovations to address challenges in tuberculosis prevention and care during the COVID-19 pandemic”](#) (Case 18).

Programmatic innovations to address challenges in tuberculosis prevention and care during the COVID-19 pandemic



Case study 18. Russian Federation: Preventive therapy for drug-resistant tuberculosis contacts in high-risk populations: Experience from Vladimir oblast

18.1 Contact person

Grigory Volchenkov

18.2 Thematic areas

Prevention; screening and diagnosis; treatment

18.3 Background of the project

The goal is to accelerate a decrease in TB morbidity and mortality in Vladimir oblast (Vladimir City and Kovrov and Murom rural districts) by implementing a comprehensive package of services based on the search, treat and prevent strategy. The objectives include provision of TB preventive therapy to people infected with TB, early detection of TB and effective treatment with contemporary methods of TB care based on a patient-centred approach, including during COVID-19. The project is implemented by the Vladimir oblast centre for phtisiopulmonology and the oblast AIDS centre.

18.4 Intervention and methods

The project is focused on vulnerable groups: high-risk contacts of TB patients, homeless people and people living with HIV. All people diagnosed with TB received prompt treatment. People without active TB but who are eligible for TB preventive therapy were given appropriate treatment according to the results of drug-susceptibility testing of the index case. Eligible people who refuse TB preventive therapy are followed monthly and after 12 and 24 months, as applicable. All treatment is administered under strict DOT by community health-care workers.

18.5 Results

As of 30 September 2020, 3500 people in the target groups had been screened for TB. Of 420 people suspected of having TB disease, 21 (5%) had confirmed active TB. Of 398 people eligible for TB preventive therapy, 280 (70%) completed a full course, 40 (10%) stopped because of adverse events, 51 (13%) discontinued therapy, and 27 (7%) are still under therapy. One person who declined and one person who discontinued TB preventive therapy but none of those who completed or continued treatment developed TB. The study showed that homeless people were at increased risk of TB: 71% of people diagnosed with active TB and 33% of those lost to follow-up were homeless.

18.6 Timeline and funding source

Start date: 1 January 2019

End date: Ongoing

Funding source: Vladimir oblast TB programme, Eli Lilly Foundation Global Health Partnership, TB REACH, Stop TB Partnership, United Nations Office for Project Services

(URL: <https://www.who.int/publications/i/item/programmatic-innovations-to-address-challenges-in-tuberculosis-prevention-and-care-during-the-covid-19-pandemic>)