The collaboration between Ministry of Justice of the Republic of Azerbaijan in bringing tuberculosis under control in penitentiary facilities

Years - 1995-2010
The ICRC has been working in Azerbaijan since 1992 in relation with conflict around NK

1994 Several prisoners of war followed up by the ICRC where suffering from TB and quite some of them where dying.

1995 ICRC supported WHO DOTS based pilot project for 300 TB patients in central penitentiary hospital including prisoners of war
The situation in penitentiary system in regard with TB by 1995

- Treatment was organized in two wards with the bed capacity 160 at the Central Penitentiary Hospital.
- TB patients were kept in general barracks.
- Absolute lack of examination and diagnostic means and resources (X-ray, clinical and bacteriological laboratory).
- Absolute lack of anti-TB drugs, and unsure quality and by unknown manufacture.
- Unsystematic, erratic, uncontrolled, non-adequate and incorrect period of use of available TB drugs.
- Non-existence of unified data base.

In 1995, 655 – 7.3% prisoners day from different deceases, including 469 – 5.2% death due to TB.
The main Intention of ICRC

- To reduce suffering of TB Patients and prevent death from TB by supporting Prison authorities in establishing sustainable TB prevention and treatment program based on international standards.
1995 – Discussions between ICRC and MOJ about finding solution to the problem and soon after signing the cooperation agreement in March.

Start of Pilot TB treatment with DOTS strategy for 300 patients in Central Penitentiary Hospital. First year 112 patients were provided with TB treatment.
Important stages of the cooperation

- 1997 – “Signing of Baku Declaration” in attendance of representatives of Austria, Belgium, France, Azerbaijan, Georgia, Poland, Russia, Switzerland
- “TB was recognized as Public Health Problem in Prisons”
- 1998 – signing of Memorandum of Understanding on cooperation between ICRC, MOJ and Ministry of Health
1998 – Establishment of Specialized Treatment Institution

- Creation of inpatient department in Col 3
- isolating the patients in separate wards according to the infectiousness and treatment phases
- upgrading bacteriological laboratory
- enrolling all TB patients in treatment with DOTS strategy
Important stages of the cooperation

- 2001–2008 upgrading laboratory in order to meet the advanced requirements
- 2003 Began of the collaboration with the Supra National Reference Laboratory in Borstel (Germany)
- 2008 – Start of cooperation with "FIND" Switzerland company on new laboratory methods
Main priorities of the joint activity on TB Control

- Creation of Data base in "Epi-info 6" computer program
- Local trainings for health staff of STI
- International trainings for health staff of STI on Data base.
- Quality assurance of data base and permanent update
Main priorities of the joint activity on TB Control

- Provision of TB drugs
  - 1995-2005 1st line drugs were provided by the ICRC
  - Sustainable and sufficient quantity of drug provision
  - Provision of vitamins and drugs for symptomatic treatment.
  - 2007-2008- provision of side-effect drugs in order to prevent adverse-reactions of 2nd line drugs.
2002 – Start of TB health education activity among detainees and prison staff

- Over 30 TB health education material (brochures, leaflets, posters) were developed and distributed

- Audio TB education used by audio tapes in prisons. On 24th of March World TB Day is marked in the colonies and documentary films were demonstrated

- 2007- “First day of remaining life” TB educational theatre performance were developed and demonstrated in 14 colonies.
2003 – Start of Active Case finding activity in penitentiary institutions

- **TB screening at pre-trial isolators by questionnaire and Fluorography methods (every year approx. 7500 person)**
- **Entry screening in the colonies by questionnaire method (every year approx. 6000 person)**
- **Mass Screening in colonies by questionnaire and Fluorography methods (every year 12-13 colonies and aprox. 8000 persons were covered). “TB suspects” passed through clinical and laboratory examinations.**
Important stages of the cooperation

- 2005 – preparing proposal for GFTAM round 5 on MDR treatment for the penitentiary system of Azerbaijan
- 2007 – preparing proposal for GFTAM round 7 on MDR treatment for the penitentiary system of Azerbaijan

- Submission of the proposal to GFTAM by CCM, proposal accepted and Ministry of Justice granted as sub-recipient
- 2006 and 2008 Grant agreements were signed

- April 2007 first time in the country MDR treatment started in penitentiary system
2009 – Submitting of the proposal to CCM for GFTAM round 9 on MDR treatment for the penitentiary system of Azerbaijan

TB proposal accepted and Ministry of Justice became Principal Recipient and 2010 - Grant agreement were signed
Application of medical regulations on TB and other infection diseases to the international standards

- August 2006 – Guidelines on TB infection control in the penitentiary system in Azerbaijan
- April 2007 – Temporal guidelines for the TB control in the penitentiary system in Azerbaijan
- June 2008 – Guidelines on preventive measures against blood transmission diseases such as HIV/AIDS, hepatitis B and C
Local and International trainings for doctors and nurses on TB management in 2001-2008

- 4 doctors – attended training on DOTS strategy, organized by WHO, Warsaw
- 5 doctors – attended training on DOTS-Plus strategy, organized by WHO, Riga
- 12 doctors and 10 nurses attended training on DOTS-Plus strategy, organized by WHO in Baku
- 4 doctors attended in study tour to Tomsk city
- 2 nurses attended the DOTS Strategy courses in the WHO training centre in Tartu
- Totally 12 local trainings were organized for the doctors and nurses

About 140 staff members attended the trainings and workshops!
Main directions of the joint activity on the TB Control

- Upgrading the bacteriological laboratory to the international standards
  - 1999 year – application of the culture and 1st line DST on solid media
  - 2003 year – External Quality Control - Borstel SNRL
  - 2005 year – UV microscopy application
  - 2006 year – general application on culture methods
  - 2007 year – application of 2nd line DST
  - 2007 year – application of the Bactec MGÎT 960
  - 2009 year – application of the GeneXpert
  - 2010 year – application of the HAÎN diagnostics
Due to the improvement of treatment and infection control in STI:

- Creation of the dispensary department in order to provide an observation of the post-treatment stage
- Construction of the separate department for the patients waiting for their culture results
- Construction of the different departments according to the treatment stages for the patients receiving 2nd line drugs
- In order to make the additional examinations needed for the diagnosis and treatment construction of the new department which include endoscopy, bronchoscope, functional diagnostics, ultra sound examination and physiotherapy cabinets
Main directions of the joint activity on the TB Control

Improvement of the infection control measures in the STI

- during 2006 – 2009 - installation of a ventilation system in the departments
- 2007 - an installation of the booths in the departments for the sputum collection
- 2007 - construction an incinerator
- 2010 - creation of the “clean area” in the departments
- 2010 – installation of the booths with phones inside for the short duration visits with the family of bacillary patients

To day 900 patients are under treatment (300 in dispensary). There are 29 wards and units in STI, 13 diagnostic cabinets and facilities
Highlighting of the joint activity on TB control and achievements

- 2006 – 2010 in the 3 Conferences of the International Union against Tuberculosis and Lung Diseases were presented 3 presentations and 11 different posters
- 2007 - during 4 Regional Congress in Riga were presented 2 posters
- The results of the GeneXpert research together with FIND was published in the "New England journal of Medicine" on September 2010
- 2011 - to the "Lanset" journal of the Great Britain has been presented 2 articles for the publication
Thank you for attention