

MARCH 24 IS WORLD TB DAY

22 MARCH 2013

Speaking in advance of World Tuberculosis (TB) day (24 March), Dr Roberto Frontini, President of the European Association of Hospital Pharmacists (EAHP), has warned European healthcare system managers and policy makers to take proactive measures now to meet the growing problem of Multi-Drug Resistant TB and the emergence of Extensively-Drug Resistant TB.

Dr Frontini highlighted 5 measures currently available to policy-makers to make a meaningful contribution to meeting the TB challenge:

1. Ensure hospital pharmacists, the secondary care sector's experts in medicines, are involved in medicines counselling for tuberculosis patients starting new courses of treatment in order to improve adherence;
2. Expand the role of hospital pharmacists in Therapeutic Drug Monitoring for patients with drug-resistant TB on long term courses of treatment;
3. Concentrate efforts on improving the systems for communication between hospital and community based healthcare professionals to deliver integrated and joined up care for TB patients;
4. Give hospital pharmacists a leading role in antimicrobial stewardship to help prevent further resistance to existing antibiotic treatments; and,

5. Redouble attention on the provision of fresh incentives for the development of new antibiotic treatments for the treatment of TB.

Dr Frontini said:

“The evidence is stark. There are over 380,000 reported new cases of TB in Europe each year, and the growing problem of multi-drug resistant TB is exacerbated by people not continuing their treatment for the full six months.

World TB Day is a time to pause and reconsider the policy options. It is clear to me that hospital pharmacy has a leadership role in improving the capacity of European health systems in meeting the TB challenge. I therefore urge system designers to be mindful of the hospital pharmacy resource and work with the profession in expanding core roles such as medicines counselling, therapeutic drug monitoring and antimicrobial stewardship.

By ensuring all professions are able to maximise the contribution of their expertise, we can reverse some of the concerning trends in the area of tuberculosis.”

ENDS

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NOTES TO EDITORS:

1. EAHP is an association of national organisations representing hospital pharmacists at European and international levels. More information about the EAHP and its history [here](#). ^[2]
2. World TB Day takes place on 24 March every year. It commemorates the day in 1882 when Dr Robert Koch astounded the scientific community by announcing that he had discovered the cause of tuberculosis, the TB bacillus. More information [here](#) ^[3].
3. Multi-drug-resistant tuberculosis (MDR-TB) is defined as tuberculosis that is resistant to at least isoniazid (INH) and rifampicin (RMP),^[1] the two most powerful first-line treatment anti-TB drugs. Usually, multidrug-resistant tuberculosis can be cured with long treatments of “second-line” drugs, but these are more expensive than first-line drugs and have more adverse effects. More information [here](#) ^[4].
4. Extensively drug-resistant tuberculosis (XDR-TB) is a form of tuberculosis caused by bacteria that are resistant to some of the most effective anti-TB drugs. XDR-TB strains have arisen after the mismanagement of individuals with multidrug-resistant TB (MDR-TB). More information [here](#) ^[5].
5. Identified pharmaceutical care needs for patients with TB include support in relation to medication adherence. Whilst poor adherence to treatment is common, strategies can be put in place to improve compliance. This includes the counselling of patients by hospital pharmacists of the importance of proper use of medication to improve self-management of treatment. More information [here](#) ^[6].

6. Therapeutic Drug Monitoring is aimed at improving patient care by individually adjusting the dose of drugs for which clinical experience or clinical trials have shown improved outcome in the general or special populations. It can be based on a priori pharmacogenetic, demographic and clinical information, and/or on the a posteriori measurement of blood concentrations of drugs (pharmacokinetic monitoring) or biological surrogate or end-point markers of effect (pharmacodynamic monitoring). Such adjustments may not be required for otherwise healthy individuals who are responding to the standard, four-drug TB regimens. However, some patients are slow to respond to treatment, have drug-resistant TB, are at risk of drug-drug interactions or have concurrent disease states that significantly complicate the clinical situation. More information [here](#) [7].

7. Antimicrobial stewardship refers to coordinated interventions designed to improve and measure the appropriate use of antimicrobials by promoting the selection of the optimal antimicrobial drug regimen, dose, duration of therapy, and route of administration. Evidence indicates that effective leadership from hospital pharmacist and microbiologist to champion an antimicrobial stewardship programme are two of the main elements that ensure its success. More information [here](#) [8] and [here](#) [9].

8. Patients undergoing treatment for TB may often have management needs in respect of their medication during both periods in hospital and in the community. Recent research by EAHP and Europharm Forum has highlighted current deficiencies in respect of existing communication channels between healthcare professionals in hospitals and community (more information [here](#) [10]). Potential solutions could include better utilisation of technology (e.g. shared access to the patient medical record) and learning and application from international best practice.

9. In the last thirty years only three new classes of antibiotics have been developed, with the practice of reserving new products exclusively as a treatment of last resort often cited as a limiting factor in terms of incentivising research into new products. The European Commission is seeking to assist the process of antibiotic development through the Innovative Medicines Initiative. Additional measures have also been suggested. More information [here](#) [11].

10) According to the World Health Organisation, a thousand new people fall victim to tuberculosis in Europe every day; over 380,000 a year. More information [here](#) [12].

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Links

[1] <https://www.eahp.eu/contact/richard.price/eahp/eu> [2]

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