

National Tuberculosis Control Programme of Finland

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Valtakunnallinen
tuberkuloosiohjelma 2006

■ SOSIAALI- JA TERVEYSMINISTERIÖ

Julkaisu 2006:21



www.stm.fi



www.ktl.fi



www.filha.fi

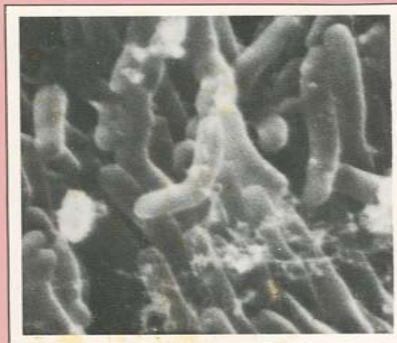


Why a National Control Programme ?

kapseli 15

LÄÄKINTÖHALLITUKSEN JULKAISU 1985 MEDICINALSTYRELSENS PUBLIKATION

TUBERKULOOSI JA SEN LÄÄKEHOITO



National Board of Health
1985

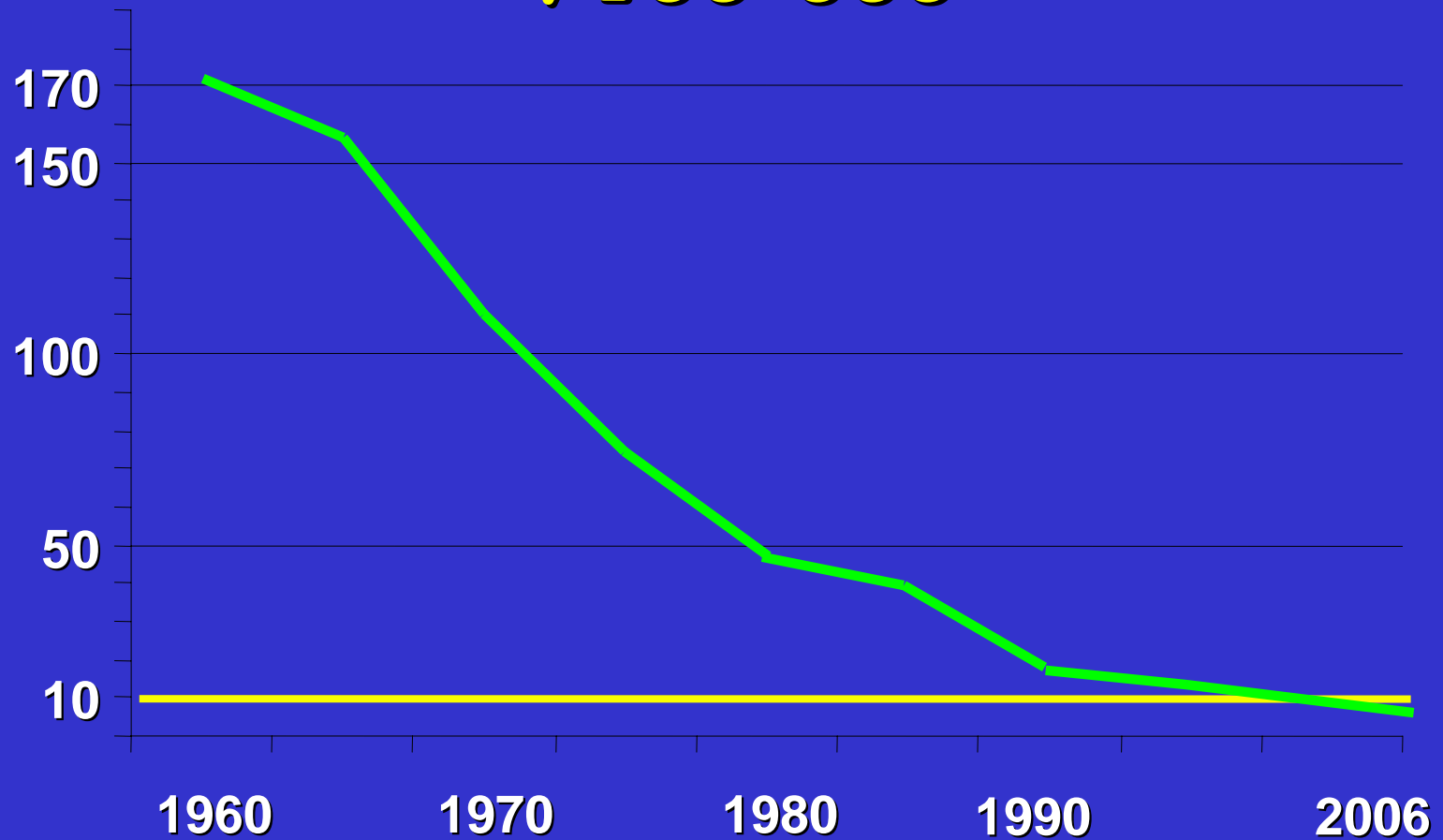
Changes in Tuberculosis Situation

- Steady decrease in the incidence in Finland
- Global increase in the incidence
- Increasing prevalence of drug resistance in many parts of the world
- Situation in our neighbouring countries
 - high prevalence
 - high incidence of multi-drug resistance
 - high HIV-infection rate

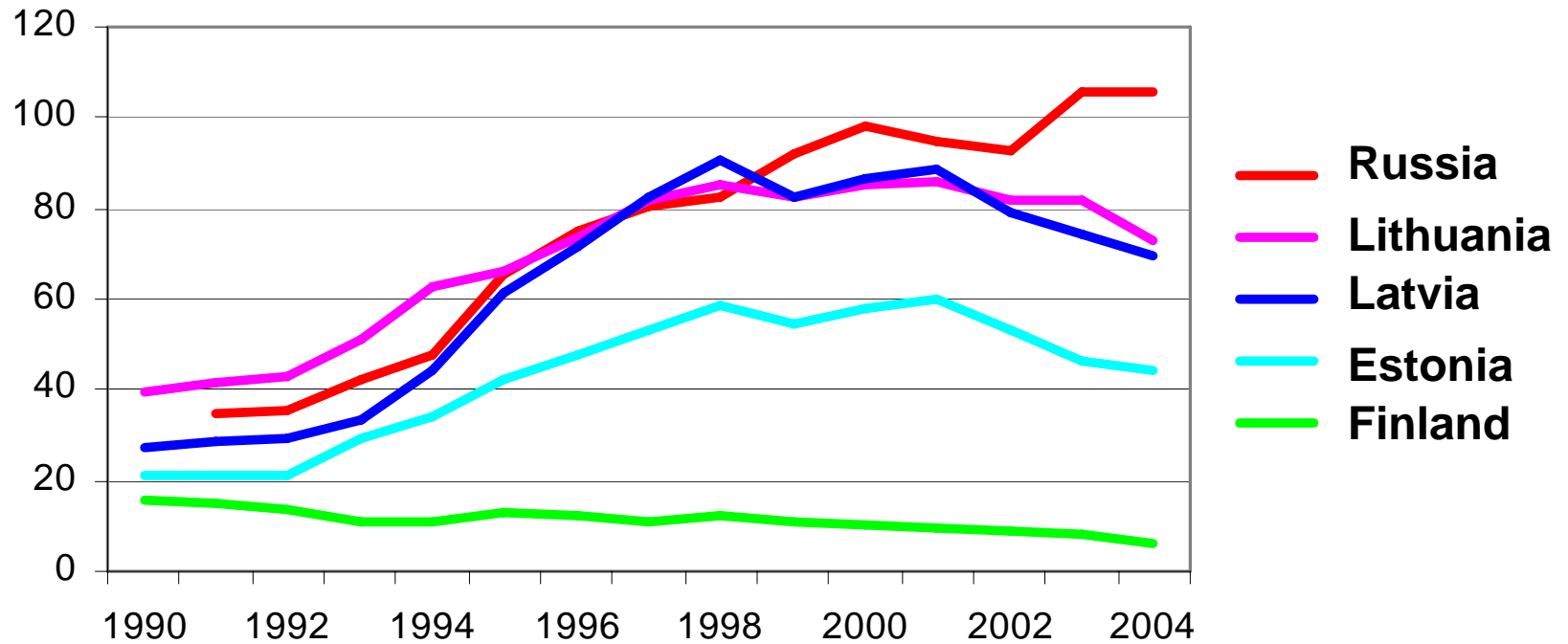
Changes in Tuberculosis Incidence Finland 1960-2006

Year	Incidence
1960	170 /100 000
1990	15
2006	< 6

TB Incidence Finland /100 000



TB Incidence in Russia, in the Baltic Countries and in Finland / 100 000 (1990- 2004)



Problems in a Low Incidence Country

- Increasing Lack of TB knowledge
- Growing Risk of Mini-Epidemics
- Great Diversity of Treatment

(Vasankari T et al. 2007)

Great Diversity of Tuberculosis Treatment in Finland

[Vasankari T et al. EuroSurveill. 2007;12(1) 17-21]

Two-year national cohort of pulmonary TB patients (n=689)

- Variable duration of treatments and combinations of drugs
- Prematurely stopped treatment by physicians
- DOT seldom used
- Long treatment periods

New Apperance of TB

- TB is concentrated in risk groups, e.g.
 - aged population
 - contacts of infectious patients
 - drug abusers
 - asylum seekers
 - foreign workers
 - immigants

Preparation of Programme

- The Ministry of Social Affairs and Health
 - commissioned **FILHA** to start the preparation of the programme
 - in co-operation with the **National Public Health Institute**
 - financially supported by the Ministry

Preparation of Programme

- Group of specialists
 - Pulmonary medicine, paediatrics, infectious diseases, epidemiology, primary health care, microbiology and nursery
- During the preparation
 - consultations of specialists from different levels of health-care services

The Aim of the Preparation Process

- National Consensus on Tuberculosis Control

Final Consensus

- Opinions Requested and Statements Received from
 - hospital districts
 - several district health centres
 - medical associations
 - institutions dealing with health care

Main Objectives of the Programme

- Early identification of contagious pts
- Successful treatment of infectious pulmonary TB pts
- Efficient prevention of new infections
- Reduction of the risk of contracting the disease
- Improved expertise of health care personell

Methods to Achieve the Targets (1)

- Improved recognition of symptoms and risk factors of TB by
 - population and health-care personell
- Treatments in accordance with current recommendations
- Directly observed therapy (DOT) to be increased

Methods to Achieve the Targets (2)

- Measures targeting risk groups to be improved
- Thorough examinations of those exposed to infection
- Control of mini-epidemics without delay

Methods to Achieve the Targets (3)

- Treatment of latent TB infection to prevent development of the disease in individuals with a high risk of contracting the disease
- Improved infection control at hospitals

Methods to Achieve the Targets (4)

- Identification of risk groups for BCG vaccination
- Increased tuberculosis research
- International co-operation to be continued

Methods to Achieve the Targets (5)

- A national consulting expert group for problematic TB cases
- A national TB control expert group to coordinate and follow up the implementation of the programme

Risk Group Interventions

- Screening
- Contact Tracing
- DOT (Directly Observed Treatment)
- Treatment of LTBI (Latent TB Infection)
- BCG Vaccination

Screening

Target groups

- Close contacts of smear positive cases
- Immigrants from high prevalence countries
- Elderly (\geq 75 years of age)
- Drug or alcohol abusers

Indications for Contact Tracing

- Search for secondary cases
 - Smear-positive pulmonary or bronchial TB
- Search for source of infection
 - Childhood TB, TB+HIV and TB meningitis

Directly Observed Treatment (DOT)

Target groups

- Drug and alcohol abusers
- Homeless
- Patients with mental or memory problems
- Elderly, children, immigrants, MDR pts

Treatment of LTBI

- Target groups
- Close contacts of smear- positive cases who are either children or immunocompromised
- Transplant receivers
- Rheumatic patients receiving TNF- α suppressive treatment

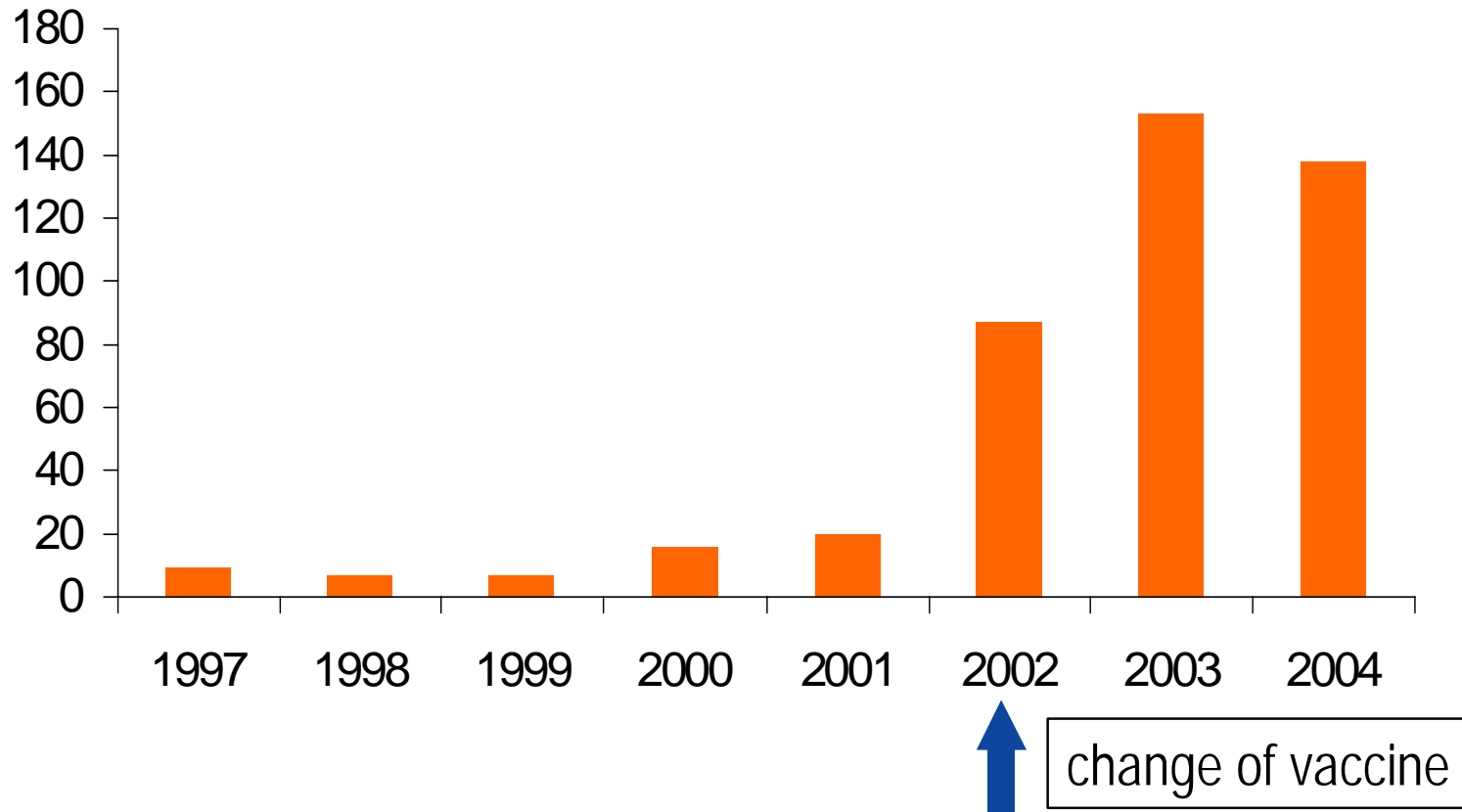
BCG

Vaccination of risk groups only
(since September 2006)

National Public Health Institute

Harmful effects of

BCG vaccinations in Finland



Targeted BCG Vaccination!

Attention to the following issues

- Risk group identification
- TB symptoms among those working with children
- Exposed non-vaccinated child
 - Rapid consultation of paediatric clinic

What is New in This Programme (1)

- First comprehensive national TB programme in Finland
- More efficient preventive measures for TB transmission in institutions
- Specific risk group measures
- Indications for contact tracing
- Targeting BCG vaccination at risk groups

What is New in This Programme (2)

- Increasing DOT, standardisation of treatment monitoring and treatment outcome monitoring
- Two national expert groups
 - for consultation
 - for follow up and coordination

Implementation of the Programme

- **Training**

- University hospital districts (2006)
- Hospital districts (2007)
- Training of specific target groups

- **Development**

- Web-based training materials (2007-2008)

Work Group

National Tuberculosis Programme

- Iris Rajalahti
- Rauni Ruohonen
- Håkan Hellberg
- Marja-Leena Katila
- Pekka Kirstilä
- Outi Lyytikäinen
- Petri Ruutu
- Ilmi Rönnemaa
- Eeva Salo
- Hanna Soini
- Marianna Tala-Heikkilä
- Tuula Vasankari