



## Drug-Resistant TB: an extraordinary situation requires extraordinary measures

*Joint statement from the Meeting on the Multi Drug-Resistant-TB Outbreak in Daru  
Held at Hideaway Hotel, Port Moresby, Papua New Guinea, 25 November 2015*

---

The Papua New Guinea National Department of Health and the World Health Organization called a meeting with their partners and community representatives on 25<sup>th</sup> November 2015 to discuss how to accelerate assistance for tuberculosis (TB) control and the multidrug-resistant TB (MDR-TB) epidemic in Daru Island, Western Province.

The participants (referred to below as The Meeting) were local and international, representing Government of PNG (GoPNG) and donor partners, non-government agencies including the private sector and not-for-profit stakeholders and experts.

### All agreed that:

- The problem of TB throughout the country and in particular the MDR-TB situation in 3 hotspots (NCD, Daru and Gulf) is a matter of great national concern
- The problem of MDR-TB in Daru is unprecedented in a population of this size; Containment of MDR-TB in Daru and other hotspots is of the utmost *urgency*
- The national and Daru-specific plans developed by the national and provincial governments with support from their partners to address these two concerns, are **strongly** endorsed by the Meeting
- The GoPNG has recognised the problem by committing K40 million to these 2 plans some six months ago (through National Executive Council Decisions 62/2015 and 80/2015)
- The Meeting commends the GoPNG for this but notes with increasing anxiety that the money has not yet flowed: to date, the response to the MDR-TB outbreak in Daru has had to rely largely on Australian Government funding (which has been significant but on its own is insufficient) and limited provincial funding
- The Meeting implores the GoPNG to release these funds to allow these excellent plans to be implemented immediately
- This is an investment, one with enormous guaranteed returns
- The cost of inaction will be catastrophic in terms of lives lost, and astronomical in terms of financial cost

- The Meeting urges the TB Ministerial Task Force to fully utilise its advocacy role and mobilise broad political support to combat Drug-Resistant TB
- An Advocacy Plan to help combat the spread of TB throughout the country should be developed
- Creation of a Business Coalition against TB and development of a population-based TB movement would be important steps in a community-wide Stop TB Program

25 November, 2015

Port Moresby, Papua New Guinea

*A Fact Sheet about TB and Drug-Resistant TB is attached to this Statement. .*

#### List of Signatories to the Statement

#	Name	Organisation	#	Name	Organisation
1	James Lawson	Burnet	30	Stenard Hiasihri	Western Province HO
2	Brendan Crabb	Burnet	31	Teresa Zurenuoc	Western Province HO
3	Evelyn Lavu	CPHL	32	Lyndel Toidalewa	BHC
4	Elizabeth Miae	DFAT	33	Roslyn Morauta	CCM
5	Chris Sturrock	DFAT	34	Mobumo Kiromat	CHAI
6	Riin Teoh	DFAT	35	Martin Timothy	PNG CCM
7	Dianne Dagam	DFAT	36	Justine Nankinga	UNICEF
8	Andrew Gavin	DFAT	37	Carol Habin	WHABA
9	Ruth Nicholls	HHISP	38	Ignatius Mogaba	FHI360
10	David Meehan	HHISP	39	Daniel Tesfoye	FHI360
11	Philip Hulcome	HHISP	40	Joan Timothy	HWW PNG
12	Paul Quinlan	HHISP	41	Quina Ongugo	HWW PNG
13	Karen Johnson	HHISP	42	Maura Elarope	Igat Hope Inc
14	Enamul Karim	HHISP	43	Andy Philip	PALSP - TN
15	Jacob Marcos	NDOH	44	Sarah Dunn	Ywam Msa
16	Kimberley Kawapuro	NDOH	45	Angelica Langlais	Ywam Msa
17	Robin Yasi	NDOH	46	David Sode	PNGSDP
18	Dr Paison Dakulala	NDOH	47	Donna Lee	Global Fund
19	Dr Paul Aia	NDOH/NTP	48	Kenneth Eisenberg	US Embassy - PNG
20	Shalala Ahmadova	WHO - WPRO	49	Joan Atkinson	USAID
21	Tauhid Islam	WHO - PNG	50	Kerry Pagau	World Bank
22	Pieter van Maaren	WHO - PNG	51	Pranita Sharma	World Bank
23	Ernesto Jaramillo	WHO - HQ	52	Ingrid Glastonbury	Oil Search Foundation
24	Curt von Boguslawski	World Vision	53	Baba Danbappa	UNICEF
25	Tanya Hisanan	World Vision	54	Suman Majumdar	Burnet
26	Sonia Madjus	World Vision	55	Steve Graham	Burnet
27	Jocelyn F. Ccbarles	World Vision	56	Lucy John	NDOH
28	Michelle Auryan	World Vision	57	Ninkama Moiya	NDOH
29	Lucy Morris	Western Province HO			

## FACT SHEET

### Background

Tuberculosis (TB) is a preventable and curable disease but remains the leading infectious disease killer in the world and in Papua New Guinea. The incidence rate of TB in Papua New Guinea is the highest in the WHO Western Pacific Region and tenth highest globally. Papua New Guinea was recently categorised by WHO as a high burden country for TB, MDR-TB and TB-HIV in the post-2015 era.

TB is spread from person to person through the air; it therefore has individual and public health consequences. In addition to the human cost, TB has extraordinary social and economic impacts. It is important to note that investing in the TB response is known to be one of the most cost-effective investments for a country's development, returning \$43 for each \$1 spent.

The TB problem is further compounded by the emergence of drug resistant TB. Based on a recent TB drug resistance survey conducted in the country, Multi-Drug Resistant TB (MDR-TB) is estimated to be present in 2.7 percent of new cases and in 19.1 percent of previously treated cases, roughly translating into about 1000 MDR-TB cases per year. The survey observed that TB is widespread throughout all provinces; however Drug-Resistant TB has emerged and spread in 3 particular hotspots: Daru, NCD and Gulf Province. If left unchecked, there are significant consequences for Papua New Guinea's health and development.

The emergence of Drug-Resistant-TB in Papua New Guinea has placed significant strain on the health system and health workers, placing them at risk.

In South Fly district and specifically Daru, the MDR-TB rate is alarmingly high evidenced by increased case notification over the past 3 years (59 cases in 2012, 61 in 2013 and 84 in 2014). So far in 2015, 106 cases of MDR-TB have been detected in Daru. Whilst the numbers in themselves may not seem high, the rate of incidence in a population the size of Daru is extremely high, possibly the highest recorded in the world at a sub-national level. The high rate of person-to-person spread or primary transmission of Drug Resistant TB in Daru is of great concern.

Moreover, extremely drug resistant TB (XDR-TB) cases have been identified among new cases indicating transmission of this deadly strain. The situation in Daru is alarming and carries a specific international risk. Failure to address the MDR-TB epidemic in Daru and the rest of Western Province will result in a significant burden of avoidable suffering and death; TB transmission will continue; cases will increase and the cost of the response will increase dramatically. The cost of caring for each Drug-Resistant TB patient is 100 times more than responding to Drug Susceptible-TB.

Failure to stem the outbreak of MDR-TB in Daru will increase the risk of transmission outside the South Fly District to other provinces and internationally. The unique Western Province TB strain has already been found in Port Moresby, which risks being an "epidemic amplifier" hastening spread. The transmission of XDR-TB, which is virtually untreatable with current therapies, must be halted, urgently.

Ultimately, TB and Drug-Resistant TB pose a great threat to Papua New Guinea's development.

### *What has been done so far?*

The National Department of Health, in close collaboration with national and international partners has developed a strong National Strategic Plan for Tuberculosis. In addition, an Emergency Response Team to address MDR TB was established in 2014, under the capable leadership of the Deputy Secretary of Health. With the support of all partners, substantial progress has been made in increased case detection and MDR-TB patient management and care. A sound foundation has been laid for accelerating the effort and containing the epidemic. Subsequently, a comprehensive provincial plan was developed to address the MDR-TB emergency in Western Province. Both the National Strategic Plan and the Western Province Emergency Response Plan need to be fully funded and implemented.

### *Conclusion*

The opportunity is there for the Government to facilitate a coordinated response to the DR-TB outbreak in Daru and TB throughout the country by mobilising high-level political commitment and by funding the National and Provincial Plans. Such an investment serves the most vulnerable populations, while promoting stability and sustainable development in Papua New Guinea.