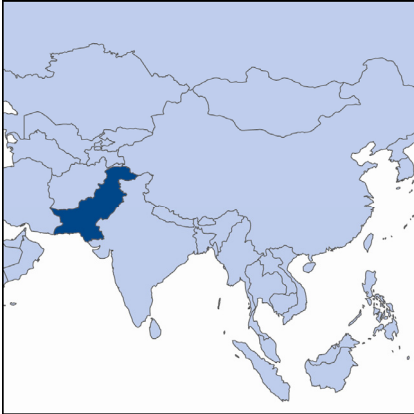




TUBERCULOSIS PROFILE



Country Population	163,902,000
Est. number of new TB cases	297,108
Est. TB incidence (all cases per 100,000 pop)	181
DOTS population coverage (%)	99
Rate of new SS+ cases (per 100,000 pop)	81
DOTS case detection rate (new SS+) (%)	67
DOTS treatment success rate, 2006 (new SS+) (%)	88
Est. new adult TB cases (HIV) + (%)	2.1
New multidrug-resistant TB cases (%)	3.2
All data are for 2007 except where otherwise noted.	
WHO Global TB Report 2009	

Pakistan ranks eighth on the list of 22 high-burden tuberculosis (TB) countries in the world, according to the World Health Organization's (WHO's) *Global Tuberculosis Control 2009*. In 2007, an estimated 297,108 people in Pakistan (primarily adults in their productive years) developed TB. The emergence of multidrug-resistant (MDR) TB and TB-HIV co-infection is a growing concern in the country.

The Ministry of Health began implementing DOTS (the internationally recommended strategy for TB control) in 1995, with Balochistan selected as a pilot province. Much progress has been made over the past five years. The case detection rate for Pakistan rose from 13 percent in 2002 to 67 percent in 2007, close to WHO's target of 70 percent. Between 2002 and 2007, DOTS coverage increased in Pakistan from 44 to 99 percent. The proportion of patients defaulting has decreased steadily over the past six years, from 17 percent in 2000 to 6 percent in 2006. The DOTS treatment success rate has improved from 79 to 88 percent between the 2003 and the 2006 cohort, thus surpassing WHO's target of 85 percent. The steep rise in case detection and the number of TB cases reported each year since 2000 is the result of nationwide efforts to increase involvement of private practitioners and community volunteers in identifying and referring TB suspects, as well as the general public who have helped with case finding. Since 2001, when the government declared TB a national emergency, progress has been steady, with support from USAID and the Global Fund to Fight AIDS, Tuberculosis and Malaria.

Despite improvements, the National TB Control Program (NTCP) still faces challenges. As TB planning shifts from the national to the district level, technical and managerial capacities at the provincial and district levels require strengthening. Moreover, the private sector may not be fully oriented to caring for patients using the DOTS approach. New MDR-TB cases rose from 2.0 percent in 2003 to 3.2 percent in 2007. Pakistan accounts for 57 percent of the MDR-TB burden within WHO's Eastern Mediterranean Region. Extensively drug-resistant TB has not been reported in the country. Pakistan has improved quality assurance of microscopy laboratories and is establishing a National Reference Laboratory, steps that are critical to successful implementation of a MDR-TB treatment program.

USAID Approach and Key Activities

USAID funding for Pakistan was \$3.8 million in fiscal year 2008. USAID assistance, in collaboration with the NTCP and WHO, focuses on DOTS expansion. This support is aimed at strengthening TB control capacity at the provincial and district levels. USAID activities include the following:

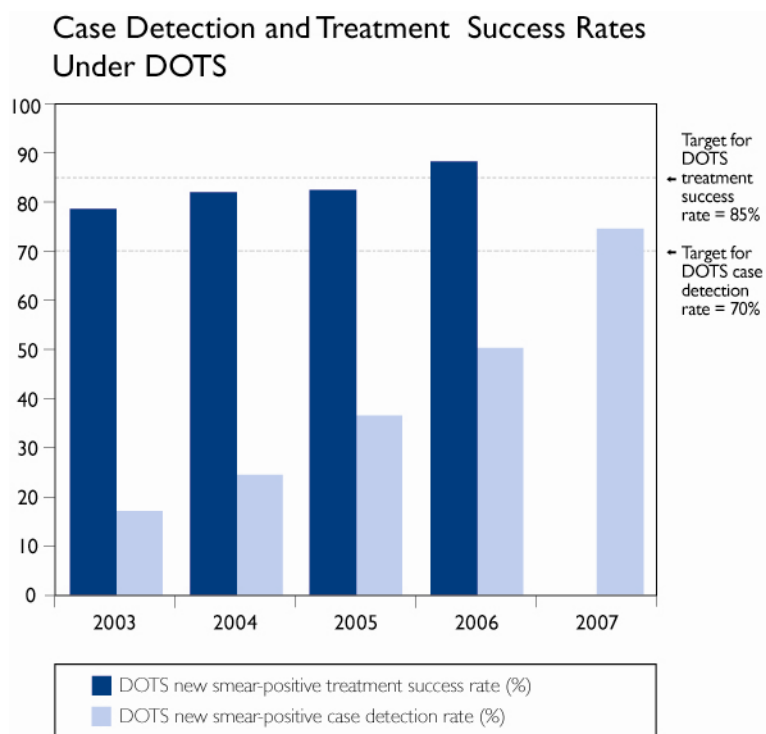
- Strengthening supervision and coordination at the provincial and district levels through National Program Officers
- Supporting a national TB prevalence survey to provide more concise estimates of the TB burden in Pakistan and to improve planning for TB control and prevention
- Providing technical assistance (TA) for strengthening DOTS expansion at the federal level
- Supporting supervision and surveillance at the district and provincial levels and improving laboratory capacity
- Conducting advocacy, communication, and social mobilization activities under the direction of sociologists and public-private partners
- Establishing referral links between the large private sector and the public sector for MDR-TB patients

- Preventing the spread of MDR-TB through increased diagnostic capacities and increased treatment completion rates
- Providing TA to the NTCP to develop and disseminate MDR-TB care and management guidelines for prevention and management of MDR-TB at all levels of health care delivery
- Supporting public-private mix activities through nongovernmental organizations in five cities: Lahore, Faisalabad, Khanewal, Rawalpindi, and Karachi
- Supporting the application for a Round 9 grant from the Global Fund or a regional approach to cross-border activities for TB patients

USAID Program Achievements

USAID's assistance and the support of other partners of the NTCP have contributed to the following improvements in TB control in Pakistan:

- Improved management, supervision, and financial administration of the NTCP through support to 20 National Program Officers
- Trained technical staff who deliver diagnostic and treatment services
- Improved skills of district-level managers who supervise and monitor the quality of diagnosis, treatment, and reporting accuracy at the facility level
- Provided TA to the NTCP, which is responsible for overall TB control activities in Pakistan, including policy formulation and strategic planning; technical and material support to Pakistan's provinces; supervision and monitoring and evaluation support; coordination with national and international partners; research; and support to the National Reference Laboratory



Note: DOTS treatment success rate for 2007 will be reported in the WHO Report 2010.
 Source: Global Tuberculosis Control WHO Report 2009

Partnerships

Partnerships have played a critical role in TB control efforts in Pakistan. Increasing numbers of national public and private partners have worked together for TB control. USAID and the International Union Against Tuberculosis and Lung Disease are the lead collaborators with the Government of Pakistan. Other international collaborators supporting DOTS expansion include the Canadian International Development Agency, the U.K. Department for International Development, the German Leprosy and Tuberculosis Relief Association, the World Bank, the Japan International Cooperation Agency, and the GTZ. The Global TB Drug Facility coordinates the provision of drugs. The Global Fund awarded Pakistan a Round 2 grant for approximately \$4 million in 2003, a Round 3 grant for \$9.9 million in 2004, a Round 6 grant for \$22.6 million in 2007, and a Round 8 grant for \$9.8 million in 2008 for TB control.