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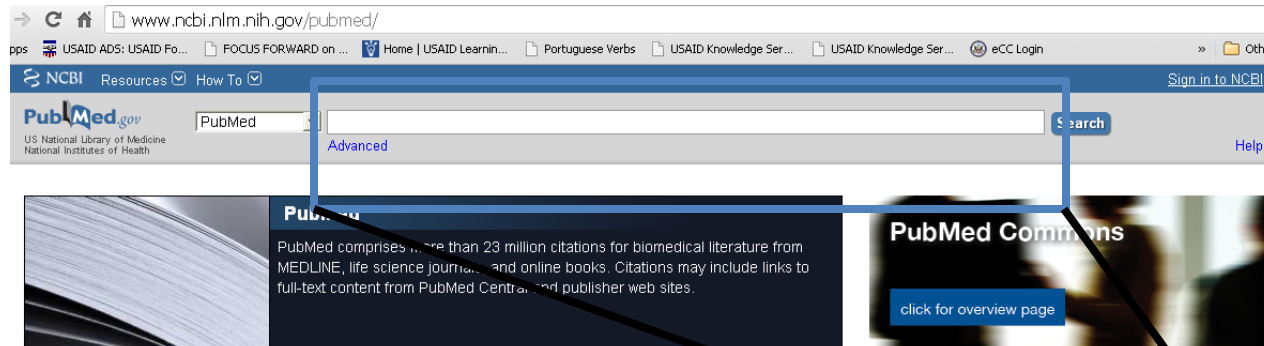
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World Health Organization, 20 avenue Appia 20, 1211 Geneva 27, Switzerland. glazioup@who.int

Abstract
OBJECTIVE: To assess whether the global target of halving tuberculosis (TB) mortality between 1990 and 2015 can be achieved and to conduct the first global assessment of the lives saved by the DOTS/Stop TB Strategy of the World Health Organization (WHO).
METHODS: Mortality from TB since 1990 was estimated for 213 countries using established methods endorsed by WHO. Mortality trends were estimated separately for people with and without human immunodeficiency virus (HIV) infection in accordance with the International classification of diseases. Lives saved by the DOTS/Stop TB Strategy were estimated with respect to the performance of TB control in 1995, the year that DOTS was introduced.
FINDINGS: TB mortality among HIV-negative (HIV-) people fell from 30 to 20 per 100,000 population (36%) between 1990 and 2009 and could be halved by 2015. The overall decline (when including HIV-positive [HIV+] people, who comprise 12% of all TB cases) was 19%. Between 1995 and 2009, 49 million TB patients were treated under the DOTS/Stop TB Strategy. This saved 4.6-6.3 million lives, including those of 0.23-0.28 million children and 1.4-1.7 million women of childbearing age. A further 1 million lives could be saved annually by 2015.
CONCLUSION: Improvements in TB care and control since 1995 have greatly reduced TB mortality, saved millions of lives and brought within reach the global target of halving TB deaths by 2015 relative to 1990. Intensified efforts to reduce deaths among HIV+ TB cases are needed, especially in sub-Saharan Africa.

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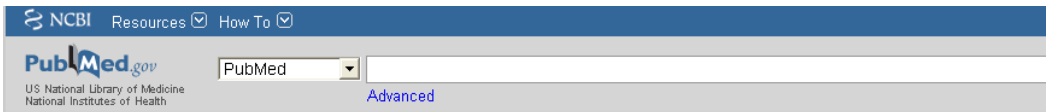


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Minnery M, Contreras C, Pérez R, Solórzano N, Tintaya K, Jimenez J, Soto S, Lecca L.

University of Queensland, School of Population Health, Brisbane, Australia.

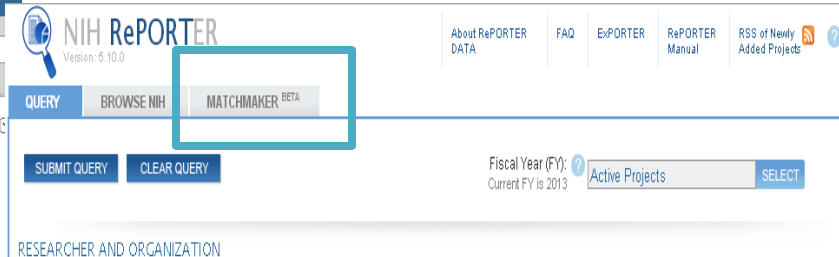
Abstract

INTRODUCTION: Tuberculosis, reported as the second most common infectious cause of death worldwide, is a key mortality contributor in developing countries and globally. The disease is endemic in Peru and while relative success was achieved during the 1990s in its control, this slowed as new complications, such as multi drug resistant TB arose. Health centre workers participating in the national DOTS program, create the front-line TB work-force in Peru meaning their knowledge and attitudes about the disease are key in its control.

METHODS: A Spanish language, multiple choice knowledge and attitudes survey was designed based on previous successful studies and the national Peruvian TB control guidelines. It was applied to two health networks in Lima, Peru amongst 30 health workers participating in the national TB control program from 66 different health centres. The study results were analysed to test mean knowledge, and attitudes towards the disease and the national TB control program.

RESULTS: A mean knowledge score of 10.1 (+/- 1.7) out of 15 or 67.3% correct was shown. Demographics of the study area were age and level of education. Major knowledge gaps were noted primarily in themes relating to treatment and community involvement including better patient education about TB was seen as important in implementing the program. Participants were in disagreement about the current distribution of health resources throughout the study area. These findings were identified from the survey; these reflect findings from a previous study in Lima and other studies from TB control efforts globally. Understanding these gaps and observations made by front-line TB workers in Lima may help to improve the national TB control efforts globally.

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