

Priority program – reduction of morbidity and mortality of tuberculosis and respiratory illnesses through effective implementation of DOTS and PAL strategies

| | Indicator | Source | 2004 Baseline | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | | Comments |
|--|--|------------------------------|------------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|---|
| | | | | | | | | | target | in fact | |
| A. EXPECTED PROGRAM IMPACT | | | | | | | | | | | |
| Reduction in mortality and morbidity of TB and respiratory illnesses through effective implementation of DOTS and PAL strategies | Tuberculosis morbidity rate (gen. pop./incl.prison pop.) | RMIC | 113.6 /128.1 | 115.7 /125.3 | 110.9 /121.2 | 108.8 /115.5 | 101,6/ 106.3 | 100,9 /103,9 | 103,2/ 105,5 | 97,4/101,1 | For 2010 the morbidity rate was declined till 97,4/101,1 per 100 thousand population. For the last years there is a steady tendency of the indicator decline. |
| | Tuberculosis mortality rate (gen. pop./incl.prison pop.) | RMIC | 11,2 /14,1 | 11,0 /14,1 | 10,2 /12,8 | 9,6 /11,2 | 9,2/9,9 | 8,7 /9,3 | 9,1 /9,5 | 8,6/9,2 | In 2010 there is not significant, but still indicator decline. |
| B. EXPECTED PROGRAM OUTCOMES: QUALITY , ACCESSIBILITY, EFFICIENCY IMPROVEMENT | | | | | | | | | | | |
| Program impact#1: More accessible TB services | % of registered TB patients who received DOTS treatment -general population -prisoners | National TB Institute (NTBI) | 99,6 /100 | 99,3 /100 | 99,5 /100 | 99,2 /100 | 99,7 /100 | 100% | 100% | 100% /100% | This indicator was achieved due to DOTS introduction countrywide, including SSPE. |
| | % of registered MDR TB patients who received treatment according to DOTS+ - general population - prisoners | NTBI | | - - | - - | - - | 12,6% /9,6% | 32,4% /13,9% | Increase % | 32,4% /13,9% | The indicator was achieved. Following 2010 results 1584 patients are treated with DOTS+, among them 1192 –civilian sector, 392 – penal sector. |
| | % of missed TB cases | NTBI | 2,7 | 2,0 | 1,4 | 1,7 | 1,3 | 1,1% | Decline % | 1,6% | The indicator was achieved due to early TB cases detection. |
| Program impact #2: Increased efficiency of service delivery | % of successful treatment: DOTS DOTS+ | NTBI | 85,3 - | 84,7 - | 82,3 - | 84,7 - | 84,6 | 82,7% | 85 | - | Data for 2009 were received following 2010 results and make 82,7%, close to WHO norms – 85%. Data for 2010 will be provided following 2011 results. |
| | % of relapsed cases | NTBI | 6,5 | 6,6 | 7,2 | 7,1 | 7,0 | 5,8% | Decline % | 6,2% | For 2010 % of relapsed cases were 6,2%. |

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|---|---|------|------|------|------|------|------|-------|----------|-------|---|
| Program impact #3: Increased efficiency of service delivery | % of TB cases detected at the PHC level | NTBI | 7,3 | 8,6 | 9,0 | 11,6 | 9,2 | 8,5% | 5 - 10 | 8,8% | For 2010 TB+ detection indicator was 8,8% at primary level. |
| C. EXPECTED PROGRAM OUTPUTS | | | | | | | | | | | |
| Improved effectiveness of anti-tuberculous services | Detected smear + among pulmonic forms of TB | NTBI | 45,3 | 47,3 | 46,4 | 44,1 | 44,1 | 40,2% | 70 | 43,9% | Among newly detected TB cases the number of bacilliform is 43,9%. Has not achieved the targeted 70% due to lack of qualitative (controlled) begma gathering and pour detection of positive begma by laboratory services. |
| Strengthened inter- sectoral collaboration | Number of medical staff and GUIN's personnel received training on DOTS strategy and TB prevention | NTBI | - | - | - | - | 57 | 60 | Increase | 100 | Medical workers training coverage in SSPE is 100%. |
| | Number of prisoners received training on TB prevention | NTBI | - | - | - | - | 65 | 70 | Increase | 75 | Prisoners training coverage on TB prevention is increasing. |