

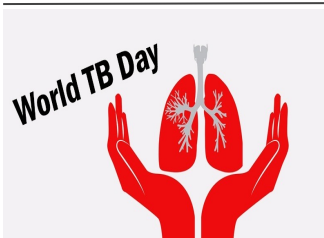


NEWSLETTER

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WORLD TUBERCULOSIS DAY



South Africa has the 5th highest burden of TB in the world. TB is epidemic (i.e., very common) and one of the leading causes of death in our country. The joint HIV/TB epidemic affects all socio-economic classes.



What is TB?

Tuberculosis is a bacteria called Mycobacterium tuberculosis. It responds to antibacterial medications (antibiotics) but because it is very slow growing it requires treatment for a minimum of 6 months with multiple antibiotics to achieve cure. TB is most commonly known to cause disease in the lungs (Pulmonary TB) but is in fact also able to cause disease in any other organ of the body e.g., lymph node TB; TB of the brain; TB of the skin and TB of the bone.

TB Diagnosis

TB is difficult to diagnose because of its ability to access all body organs. Ideally, microbiological proof of the bacteria will confirm diagnosis (i.e. finding the bacteria inside the sputum or lymph node or other organ) but this is not always possible and sometimes a diagnosis is made based on symptoms, without proof.

TB Cure

TB is curable, and if a person is also HIV infected, it's advised to treat both the TB and the HIV to achieve the best outcome. This means lifelong Antiretroviral treatment and TB treatment for the appropriate length of time.

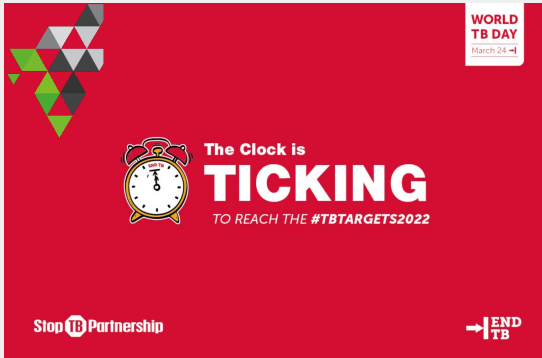
Who gets TB?

TB can occur at any age, in any person. It's seen in newborns who have acquired TB from their ill mother's placenta; or older children who acquire it from a caregiver; or adults and pregnant women, in rich and in poor communities, in HIV + and HIV -.

QUICK FACTS ABOUT THE STATE OF TB IN SA

1. Tuberculosis (TB) remains a crisis in South Africa. It is the top cause of death indicated on death reports. There are over 400 000 cases of TB in South Africa every year. TB cases are slowly coming down, but it is not happening nearly fast enough.
2. One of the biggest problems with TB is that we do not diagnose people fast enough and get them on to treatment fast enough. This is bad for the health of people with TB, but also contributes to the spread of TB in our communities. Two potential solutions are active case finding (ACF) and contact tracing. ACF is when healthcare workers or community healthcare workers go out and look for people with TB. Contact tracing is when we trace the family and/or work contacts of someone with TB and then test them for TB as well.
3. Another critical problem in our response to TB is the poor infection control measures in most public spaces. In taxis, or in waiting rooms at clinics, or at Home Affairs offices, etc often the windows are not opened and all the people present breathe the same air. In addition, many prisons are overcrowded and create ideal conditions for the transmission of TB.
4. There are over 20 000 cases of drug-resistant TB (**DR TB**) in South Africa per year at the moment. It appears that the rates of **DR TB** are going up – something which surely constitutes a public health emergency. **DR TB** is much more difficult and more expensive to treat than normal TB. There is also evidence suggesting that most people with **DR TB** did not develop the drug resistance while being treated for normal TB, but were infected with TB that was already drug-resistant
5. Until recently, treatment for multiple drug-resistant TB (**MDR TB**) took two years, and often resulted in severe side effects such as deafness. However, the World Health Organisation recently recommended a new nine-month regimen with fewer side effects for the treatment of **MDR TB**. South Africa is in the process of introducing this new, shorter regimen.
6. While the new nine-month **MDR TB** regimen is an improvement on previous regimens, it still entails a large number of pills and injections and is associated with substantial side effects. The good news, however, is that a number of trials are under way to test even shorter regimens that will contain no injections, and hopefully will have even fewer side effects.
7. Extensively drug resistant TB (**XDR TB**) is the most difficult form of TB to treat, and over 70% of people with **XDR TB** in South Africa die within five years. There is good news, however: an ongoing trial in South Africa called Nix-TB is showing much higher cure rates for **XDR TB** than we've ever seen before.
8. People living with HIV are at higher risk of contracting TB. For this reason, people are given isoniazid preventative therapy (IPT) to prevent the development of TB. For years IPT treatment rates in South Africa were very low, but recent figures suggest that many more people are now receiving IPT and being protected against TB.

LOOKING AT THE INTERNATIONAL WORLD



It is World TB Day 2021, and we want to make sure that all of us engaged in the TB response, as well as people affected by TB and TB survivors align and get together around this year's theme **"The Clock Is Ticking."**

The COVID-19 pandemic is in its second year and is unfortunately taking increasing medical resources and attention away from providing necessary life-saving diagnosis, medicine and care to people suffering from tuberculosis (TB). Alarming, in low and lower-middle-income countries, TB remains the biggest infectious disease killer. We have now less than two years left to fulfil our promises and take action on the commitments made at the United Nations High-Level Meeting (UNHLM) on TB in 2018 so, **The Clock Is Ticking**.

With this theme, the Stop TB Partnership and all partners are sounding the alarm that while we focused on COVID-19, every single day 4 000 people die and 27 000 people get sick with TB.

Now more than ever, we need doubled support to raise awareness and our ambitions, honour commitments and mobilise badly needed resources to help achieve the UNHLM targets by 2022. World leaders have until December 2022 to make good on their word and keep their promises, or we risk losing thousands of lives to a curable and preventable disease.

LET US RAISE AWARENESS AND STOP TB!





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THANK YOU

SOURCE

http://www.stoptb.org/news/stories/2021/ns21_006.html

<https://www.spotlightnsp.co.za/2017/09/06/10-things-know-tb-south-africa/#:~:text=%2010%20things%20to%20know%20about%20TB%20in,the%20poor%20infection%20control%20measures%20in...%20More%20>

<http://www.dgmc.co.za/tuberculosis-in-south-africa/#:~:text=Tuberculosis%20in%20South%20Africa.%20South%20Africa%20has%20the,TB%3F%20Tuberculosis%20is%20a%20bacteria%20called%20Mycobacterium%20tuberculosis>

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