

Unite to end multi-drug resistant TB

WE'RE LEAVING NO-ONE BEHIND

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480,000 people with MDR-TB in 2014*



Treatment for MDR-TB is long and arduous and can have a serious psychological and financial impact on patients and their families



Among patients who started medication for MDR-TB in 2012, only 50% successfully completed their treatment*



* WHO Global Tuberculosis Report 2015

MDR-TB: a lonely disease

Our study in Nepal shows...

MDR-TB causes anxiety, depression and hopelessness in many patients



Family and social support is a key determinant of psychological wellbeing for MDR-TB patients

The extent to which this support is available is often determined by gender and marital status



Married women with MDR-TB suffer greater stigma, isolation and discrimination, often forced to leave home by their families

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Improving mental wellbeing

Lack of knowledge about MDR-TB and its treatment fuels further psychological stress for patients and families



In **Nepal**, we have developed a psychological support package for patients with MDR-TB, including:



tailored information for patients and families



screening for anxiety and depression



psychological support and one-to-one counselling

Working with employers to tackle TB

4 million workers are employed in the **Bangladesh** garment sector



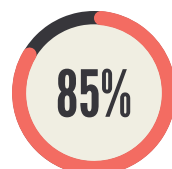
80% of these are poor, young and female



In our study, we partnered with factory owners and private medical practitioners to offer free workplace TB diagnosis and treatment...



100% of patients treated in the workplace completed their treatment



85% of patients referred from the factory to a TB centre completed their treatment

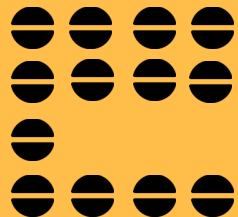
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Faster treatment - less interruption

Our study in Shandong, China shows...



80% of MDR-TB patients waited more than 90 days for diagnosis



Almost 70% reported an interruption in their treatment



Interruptions were less severe when families provided directly observed treatment (DOT)

We recommend:



1. Better equipment and training in hospital laboratories

2. More streamlined transport for sputum samples

3. Proper training for family members to provide DOT

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