MDR-TB: RESISTANCE TO INH ASSOCIATED WITH RMP, AND ONLY TO RMP

Natal S, Toledo A, Penna MLF, Valente J.

Resistance is a major problem within our milieu. Drugs should be handled by people with adequate knowledge of both the pharmacology of the drugs used in the treatment of tuberculosis and its etiopathogeny.

Discontinuance of treatment remains the great “villain” for the poor performance of the TCP.

Patients with a Tb treatment history, even if last discharged for “cure”, should be adequately monitored for resistance detection.

Special care should be given to patients with Tb-HIV co-infection.

Tuberculosis is no simple task, as one believed in the early 80s, it is still the disease that kills more adults in productive age, and annually it can kill more than AIDS.

It is important that people involved with “tuberculosis”, at all levels, keep in mind that the guidelines are important as a TCP strategy, but that every patient is an individual with his/her own particularities.

CRPHF/FNS/MS & IMS/UEIRJ. Rio de Janeiro. Brazil. sonianatal@uol.com.br.

EVALUATION OF PROGRAM IMPLEMENTATION THROUGH CASE STUDIES OF MALARIA, DENGUE, TUBERCULOSIS AND HANSENIAISIS IN LEGAL AMAZON


The research project Evaluation of Malaria, Dengue, Tuberculosis and Hanseniasis: Regional/Municipal Case Studies in Legal Amazon is conducted by the laboratory of evaluation and analysis of regional endemics situations (LASER) – a branch of the Samuel Pessoa Department of Endemic Disease at Brazilian National School of Public Health – and by the Maria and Leônidas Deane Research Center at FIOCRUZ-Amazonia.

This project joins together the experience of academic researchers, local managers, municipal health secretaries through the Council of Municipal Health Secretaries (CONASEMS) and the service network of Brazilian National Health System (SUS). Its main concern is to answer operational questions related to the implementation of malaria, dengue, tuberculosis and hanseniasis control programs. Besides developing and employing evaluative techniques (evaluation logical models) to specific cases, the project sets up a permanent and-regionally-articulated network for technical advice. This is taken as the first step for developing a regional observatory of health and disease situations in order to monitor and control regional processes related to the dynamics of production and reproduction of endemic and epidemic situations in the Amazon.

Program evaluation has no long tradition in transforming and setting endemic disease control policies. It constitutes a new and promising field for the production of knowledge as well as for the definition of managerial models. Although the process of decentralized control of endemic disease has known differences in Brazil, there is neither modern instruments nor indicators capable of pointing out its own internal characteristics. In relation to this specific point, an evaluative approach to systematize presumed successful efforts in Legal Amazon should make possible a better understanding of relevant factors for disease control in local communities. This approach is based on case studies of implementation analysis and on case studies of actions conducted for controlling Malaria (case handling), Dengue (vector eradication and case handling), tuberculosis (financial incentive for cured case) and Hanseniasis (decentralization of polychemotherapy).

The analysis of these experiences might set effective regional strategies of endemic disease control. Additionally, these analyses shall contribute to design logical models of rapid evaluation adapting qualitative rapid evaluation techniques (REM-Rapid Evaluation Methods) that have already proved successful in previous research conducted by the World Health Organization. The model comprehends its respective