

# SAMU HIV/TB News Flash

August 2015



## 'New Start' regimen being considered for some DR-TB patients in Khayelitsha

A new treatment regimen for multidrug-resistant (MDR-TB) tuberculosis will soon be piloted by the Khayelitsha project. Currently, the treatment outcomes for people with MDR-TB are poor, and the traditional regimen is long (up to two years) and traumatic as it includes daily injections of a medication for the first ~8 months. It is no wonder that a significant proportion of patients never complete their treatment.

Taking advantage of a new anti-TB medication called 'bedaquiline', the Khayelitsha project plans to pilot a much more patient-friendly regimen for people suffering from DR-TB. This 'New Start' treatment regimen will be injectable-free and more tolerable than the traditional regimen, and is expected to be more effective. It will consist of seven drugs at the outset and be strong enough to cover all drug resistance patterns, which will then be adapted as full drug sensitivity testing (DST) results become available.

For more information on this initiative, please contact Eric Goemaere at [eric.goemaere@joburg.msf.org](mailto:eric.goemaere@joburg.msf.org).

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## Some recent publications of interest



### The need to accelerate access to new drugs for MDR-TB

In the latest WHO Bulletin, Helen Cox et al suggest that the current MDR-TB epidemic is being driven by poor access to MDR-TB treatment, via ongoing transmission. New anti-TB drugs provide an opportunity to improve treatment regimens, but current and planned clinical trials hold little promise for developing regimens that will facilitate prompt treatment scale-up. They argue that such clinical trials should be complemented by timely, large-scale, operational research that will provide programmatic data on the use of new drugs and regimens while simultaneously improving access to life-saving treatment. Read more [here](#).

### Young key populations and HIV

A viewpoint [paper by Baggaley et al, entitled 'Young key populations and HIV'](#), looks at five key populations: men who have sex with men, people who inject drugs, people in prisons and other closed settings, sex workers and transgender people. The paper finds hugely disproportionate risk among adolescents within each key group. As noted by Tom Ellman, the implications are clear: we need to do a better job of targeting adolescents and youth in all key populations, and ensure they have access to both pre-exposure prophylaxis (PrEP) and post-exposure prophylaxis (PEP).

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## Update on Hepatitis C initiative



MSF is now routinely screening for infection with Hepatitis C virus (HCV) in a number of its projects, including in Machar Colony, an urban slum in Karachi, Pakistan. A new, revolutionary combination of oral drugs, known as 'direct acting antivirals' (DAA) is now available, which can often cure the HCV infection within a few months. The project in Machar Colony began offering DAA to eligible patients in May 2015. In addition, OCB is part of an intersectional MSF initiative entitled "Ensuring access to the HCV treatment revolution for HCV/HIV co-infected patients in low- and middle income countries", which includes funding from UNITAID. As part of this initiative, SAMU is supporting implementation of HCV treatment and care in three OCB sites: Mumbai (India), Kibera (Kenya) and a forthcoming project in Kiev (Ukraine). All of these sites plan to start treating HCV patients by the end of 2015.

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## Guideline updates



MÉDECINS SANS FRONTIÈRES  
VIRAL LOAD TOOLKIT  
AN IMPLEMENTER'S GUIDE TO INTRODUCING  
HIV VIRAL LOAD MONITORING



- The [Viral Load Toolkit](#) now has an updated training package ([available here on the SAMU website](#)) that covers details related to lab implementation of viral load, along with training for clinicians and counsellors, plus tools and guidance for patient education. Thanks to all field teams that have contributed! Download the [Viral Load Toolkit](#).

- A [PMTCT training package](#) is now also available. The full training package, available on the SAMU website [here](#), can be used to assist in the organisation of one-day, face-to-face training sessions on PMTCT. Thanks to Helen Bygrave for her work on this.

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## Training Corner

A **drug-resistant tuberculosis (DR-TB) workshop** organised by SAMU will be held in Cape Town, South Africa, between 22-27 November 2015. All MSF staff with key roles related to DR-TB management are invited to apply by requesting an application form from Tandi ([tandi.gadla@joburg.msf.org](mailto:tandi.gadla@joburg.msf.org)). Ministry of Health representatives (associated with an MSF project) and those from HQ are also welcome to apply. The workshop will be held in English.

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## Upcoming Conferences

- **Union Conference:** 2 - 6 December 2015, Cape Town

**Registration deadline:** 1 September 2015

**Late registration deadline:** 29 November 2015. More info is available on [capetown.worldlunghealth.org](http://capetown.worldlunghealth.org)

- **Conference on Retroviruses and Opportunistic Infections (CROI):** 22 - 25 Feb 2016, Boston, USA

**Abstract submission:** 30 September 2015; registration deadline: 5 January 2016

**Late registration deadline:** 26 January 2016. More information is available on [www.croiconference.org](http://www.croiconference.org)