

Towards TB elimination: ECDC and ERS introduce new guidelines on tuberculosis care in Europe

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Today, the European Respiratory Society (ERS) and the European Centre for Disease Prevention and Control (ECDC) publish their jointly developed European Union Standards for Tuberculosis Care (ESTC). The 21 patient-centred standards aim to guide clinicians and public health workers to ensure optimal diagnosis, treatment and prevention of tuberculosis (TB) in Europe – with nearly 74,000 reported TB cases in the EU/EEA in 2010 clearly showing that TB remains a public health challenge across the region.

The new EU-specific guidelines were developed by a panel of 30 experts and aim to bridge current gaps in the case management of TB that were identified in a recent survey. In the process, the ERS has taken the lead in developing the clinically related [standards](#) and ECDC has developed the public health related standards. The ESTC are based on the same recommendations as the International Standards for TB Care (ISTC), but feature additional supplements and replacement information relevant for healthcare providers in the EU.

EU-specific recommendations from the new guidelines include:

- All people showing signs, symptoms, history or risk factors linked with TB should be examined for TB.
- All people diagnosed with TB should undergo drug susceptibility

testing in a laboratory setting, to rule out drug-resistance and help combat the growing number of multidrug-resistant cases of TB (MDR-TB).

- Patients with, or highly likely to have, TB caused by drug-resistant organisms (especially MDR-TB) should be treated for at least 20 months, with the recommended intensive phase of treatment being 8 months.
- Clinicians should ensure that all newly admitted patients who are suspected of having infectious TB are subject to respiratory isolation until their diagnosis is confirmed or excluded following an appropriate infection control plan.

The guidelines also include an additional section on how policymakers and healthcare professionals can adopt and introduce the recommendations to a healthcare setting.

"Multidrug-resistant and extensively drug-resistant TB have taken a foothold in the EU: 4.6% of the TB patients were diagnosed with MDR-TB in 2010 and only 30% of the MDR TB patients notified in 2008 have been successfully treated and the proportion of XDR-TB patients increased from 8.2% to 13.2% from 2009 to 2010," warns ECDC Director Marc Sprenger. "We have to do better than that and actively prevent drug-resistant TB. To do this, the new EU Standards offer hands-on and easy-to-use advice tailored to the needs of the EU/EEA. It is every TB patient's right to receive the best of care and we have a responsibility towards EU/EEA citizens to prevent any more spread of TB, MDR-TB and XDR-TB."

President-elect of the ERS, Professor Francesco Blasi, who is also an author of the new guidelines, said: "Across Europe, TB poses a serious threat to [public health](#). With accurate prevention, diagnosis and treatment, we can diminish this threat. Standards for TB care in Europe are still below an acceptable level and recent surveys have highlighted

gaps in the case management of TB. The new guidelines include key recommendations relevant to a European audience, which can help reduce the spread of TB and improve patient care."

The publication of the [guidelines](#) coincides with the start of a special review series in the *European Respiratory Journal*, looking at the current state of TB in [Europe](#). The series begins today with an editorial and paper on the prevalence of inappropriate TB treatment regimens. Four more papers will follow in upcoming editions of the Journal.

The ERS has also recently launched (early March) the European Forum for TB Innovation which aims to identify and highlight the gaps, challenges and needs in innovating and optimising European and global TB control.

Provided by European Lung Foundation

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