

SUMMARY

The EuroTB programme collects standardised information on tuberculosis case notifications including anti-tuberculosis drug resistance in the WHO European Region. In 1998, 363 521 cases of tuberculosis were notified in the 51 countries of the Region, of which 12% were in patients with a previous episode of tuberculosis. Notification rates were very different in three geographic areas:

- 13 per 100 000 in the West (the 15 EU countries, Andorra, Iceland, Israel, Malta, Monaco, Norway, San Marino, Switzerland);
- 78 per 100 000 in the East (the 15 Newly Independent States of the former Soviet Union, including the Baltic countries Estonia, Latvia and Lithuania);
- 47 per 100 000 in the Centre (the 13 remaining countries of the WHO European Region).

Compared to 1995, notification rates in 1998 decreased by 9% in the West, were relatively stable in the Centre (+3%) and increased markedly in the East (+37%).

Notification rates were highest in patients aged 65 or over in the West, peaked in the age group 25-34 in the East and were stable after age 35 in the Centre. Among adults, notification rates were higher in males, with greater sex differences in countries with higher notification rates. In the West, patients of foreign origin accounted for 27% of the cases notified and for more than 40% of cases in 10 countries.

In the 38 countries reporting data on culture, culture was positive for 50% of TB notified cases overall. The proportion of smear positive cases among pulmonary / respiratory cases was 41% overall in the 42 countries reporting this information.

The results of drug susceptibility testing (DST) at the start of treatment for notified cases (collected in the West, Centre and Baltic countries) were provided from 26 countries. Among the 18 countries providing DST results for more than 35% of notified cases and providing data by previous anti-TB treatment status, levels of drug resistance were lower among cases never treated compared to cases previously treated. The proportions of cases never treated resistant to at least isoniazid and rifampicin (multi-drug resistant cases, MDR) were 5-15% in the Baltic countries and lower than 1% in 14 countries in the West and in the Centre. Among cases previously treated, proportions of MDR-TB cases were 11-37% in the Baltic countries and 0-8% in the other countries. In the West proportions of MDR-TB cases were higher among foreigners compared to nationals.

In most countries in the West and in the Centre, the decrease or stabilisation in notification rates in recent years and the relatively low levels of drug resistance indicate that tuberculosis control programs are overall efficient in containing TB transmission. However, in many countries in the West, cases in patients of foreign origin represent a high and often increasing proportion of notified cases.

In the East, increasing tuberculosis notification rates in most countries are due to a combination of factors. In several countries socio-economic difficulties have led to the impoverishment of some population groups and to the disruption of health services, which may, in turn, have resulted in increased TB transmission. The high proportion of MDR-TB cases reported from the Baltic countries reflects probably difficulties in tuberculosis treatment programmes and calls for an assessment of drug resistance levels and trends in other countries in the East. The large HIV epidemics emerging in many countries in the East may further affect the situation of tuberculosis in the near future.

Surveillance data provided to EuroTB are increasingly standardised and complete. They confirm the interest of international surveillance for both monitoring trends and contributing to the evaluation of tuberculosis program.