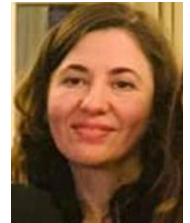


## Multidrug-Resistant Tuberculosis: Improving Response to Challenge

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### Abstract

**Statement of the Problem:** The Association Agreement with Europe commits Georgia to conduct epidemiological surveillance of transmitted diseases, including tuberculosis and its resistant forms. Until 2016 Georgia was among the twenty-seven countries under the “high burden” of resistant tuberculosis. The situation has been improved since 2016, but the problem of resistant tuberculosis has not lost its sensitivity and has proved to be a major challenge for the country as airborne disease, “attacking” people in reproductive age and with low immunity.

**Methodology:** Desk research based on the data of different countries (laws, studies, and statistics), case study, and comparative analysis of research conducted in Georgia. In addition, five In-Depth Interviews were conducted with four employees of the National Tuberculosis and Lung Disease Center and one WHO Technical Officer.

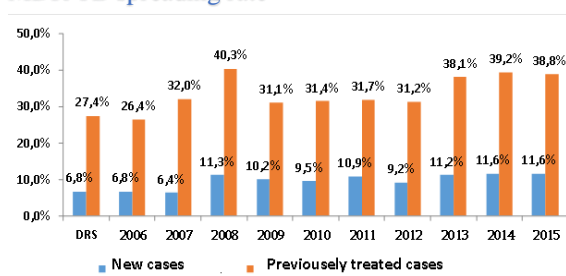
**Findings:** The continuity of treatment of resistant tuberculosis (with its many sub-components - personal, social and institutional) is a central factor for prevention and decrease of the disease, along with factors such as TB diagnosis, governance, financing and TB/HIV collaboration. In 2013 and 2016, in Georgia, three barriers for the continuity of treatment were identified: stress / depression, financial, time constraint (e.g. loss of job due to illness) and problems in medical service, and motivator - social support.

**Conclusion:** The prevention of resistant TB as a public health risk, involves a number of interrelated measures, including the improvement of: TB control law (Mandatory Isolation), which resulted in contradictory assessments and medical services (e.g. management of side effects, training of health care workers, wide coverage of the primary health care and TB institutions, technology (Telemedicine development) and screening, enhancement - expansion of multidisciplinary approach)), as well as information campaigns (peer education, fighting against stigma, main target groups, family, society, employers).

**Keywords:** Resistant TB, treatment continuity barriers

### Figure

MDR TB spreading rate



Source: NCDC (2016)

### Biography:

Nino Korinteli brings 10 years research experience. From 2016 she was working as an individual consultant with several organizations: Public Defender of Georgia, Tbilisi State University, etc. From 2009 to 2016 she was working as an expert-analyst and was involved in research projects which gave her the possibility of being familiar with various issues: health care, education and training, social protection and social inclusion, etc. She collaborated with different local and international organizations (such as USAID, UNDP, UNICEF, SDC, UNAIDS, OXFAM, URC, etc. Nino is also Certified Public Policy Analyst (CPPA) Program graduate (North Texas University & Free University Georgia).

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