

XXVI International Comprehensive Course on Epidemiology and Control of Tuberculosis
3 to 11 April 2017 in Lima, Peru

Agenda:

3 April

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| 8.00-8.30 | Registration |
| 8.30-9.00 | Opening remarks
Introduction of participants and facilitators |
| 9.00-9.30 | Pre-Course Evaluation Test |
| 9.30-10.00 | Learning objectives of the course |
| 10.00-11.00 | Origin and History of the TB. Can the TB be eradicated in the next decades? |
| 11.00-11.15 | Break |
| 11.15-12.15 | Biological characteristics and condition of <i>M. tuberculosis</i> Growth |
| 12.15-13.15 | Basic concepts in TB.
Bacillary populations of <i>M. tuberculosis</i> .
Relapses, Failures, Defaulters, bad adherence |
| 13.15-14.15 | Lunch |
| 14.15-15.00 | Epidemiology of tuberculosis and drug resistance in the country |
| 15.00-16.00 | Global epidemiology of TB and MDR-TB
Analysis of factors contributing to MDR- and XDR-TB
Transmissibility, virulence and fitness of resistant strains of <i>M. tuberculosis</i>
and its possible influence for the future |
| 16.00-16.15 | Break |
| 16.15-18.00 | Working Groups (4-5 groups with 4-5 participants). Practical exercises
addressing the topics presented in the day.
Discussion of national TB and MDR/XDR-TB Cases |

4 April

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| 8.00-8.45 | Review of the Highlights Day 1 |
| 8.45-10.00 | Diagnosis of the Infection TB. Tuberculin skin test and IGRAs |
| 10.00-11.00 | Clinical and Radiography manifestations of TB |
| 11.00-11.15 | Break |
| 11.15- 12.30 | Conventional laboratory procedures: Smear, culture and Identification of
species |
| 12.30-13.15 | Other procedures supporting the TB diagnosis: histologic findings, adenosine
desaminase (ADA), and others |
| 13.15-14.15 | Lunch |

- 14.15-16.00 Drug resistant TB can be curable and avoidable
- 16.15-18.00 Working Groups (4-5 groups with 4-5 participants). Practical exercises addressing the topics reviewed in the day.
Discussion of national X/MDR-TB Cases

5 April

- 8.00-8.45 Review of the Highlights Day 2
- 8.45-11.00 Basic concepts in drug resistance
Natural resistance. Primary or initial resistance (new drug resistance)
Secondary or acquired resistance (previously treated drug resistance)
Transient resistance. Poly-resistance, MDR and XDR
Possibilities of drug resistant after failures, relapses, defaulters and poor adherence
- 11.00-11.15 Break
- 11.15-13.15 Diagnosis of drug resistant tuberculosis
Risk factors for drug resistance. Classification of MDR-TB
The importance of the history of previous drug intake by patient and drug utilization in the country.
Support of the Drug susceptibility testing for management of drug resistant TB.
Reliability.
Techniques for rapid diagnosis of drug resistant TB (LPA, Xpert, etc)
- 13.15-14.15 Lunch
- 14.15-16.00 Infection control - minimal requirements given limited resources
- 16.00-16.15 Break
- 16.15-18.00 Working Groups (4-5 groups with 4-5 participants). Practical exercises addressing the topics reviewed in the day.
Discussion of national X/MDR-TB Cases

6 April

- 8.00-8.45 Review of the Highlights Day 3
- 8.45-10.00 Initial Treatment of TB. Principles
Intermittent regimens.
Special situations in the treatment of the TB
- 10.00-11.00 Treatment of the TB According the Pattern of Resistance (1)
Treatment of Susceptible TB
Treatment of Mono-Poly Resistant TB
- 11.00-11.15 Break

11.15-13.15	Treatment of the TB According the Pattern of Resistance (2) Treatment of MDR/XDR-TB Duration of the intensive and continuation phase of treatment. Role of the surgery in the management of drug resistant TB. Standardized and individualized treatment regimens.
13.15-14.15	Lunch
14.15-16.00	Tuberculosis, MDR-/XDR-TB, and HIV. Update and management
16.00-16.15	Break
16.15-18.00	Working Groups (4-5 groups with 4-5 participants). Practical exercises addressing the topics reviewed in the day. Discussion of national X/MDR-TB Cases

7 April

8.00-9.00	Review of the Highlights of the Course
9.00-11.00	Reasoning the best treatment options for a NTP What is the best Category I Regimen to recommend in a NTP ? Category II regimen - origin and current rationale Which is the most appropriate approach for: <ul style="list-style-type: none"> - Relapses and Defaulters to Category I regimen - Failures to Category I regimen - Failures to Category II regimen - MDR-TB Patients in the different scenarios
11.00-11.15	Break
11.15-12.45	Adverse Reactions to First and Second Line Drugs Practical approaches and appropriate management.
12.45-13.15	Avoiding the stigma with the TB patients. Ethical issues in the management of TB patients
13.15-14.15	Lunch
14.15-18.00	Practical Exercises

8-11 April

Field Visits (health's centres, laboratories, central unit of the NTP), Information system, technical assistance methodology and other operational issues