

Twenty years of key Operational Research Studies and its impact on tuberculosis care and control in India

New Delhi, India/ 27 March 2014: Operational research has historically played a key role in shaping policies and practices for tuberculosis control in India. This week the International Union Against Tuberculosis and Lung Disease (The Union) South-East Asia Office launched a report on the contributions of operational research – *Operational Research for TB Care and Control in India: Continuity and Change*.

This landmark report is the first compilation of the most significant operational research (OR) studies in TB control undertaken in India and published in peer-reviewed scientific journals over the last 20 years (between 1993 and 2013). Key policy decisions that have been driven by evidence from OR studies include: testing for TB based on two weeks of cough, rather than three; requiring two sputum smears instead of three for diagnosis; routine HIV testing for TB patients; IPT (Isoniazid Preventive Therapy) for HIV+ patients; and dose revision for pediatric TB. Other issues that have been explored include the reasons behind delays in diagnoses, irrational use and sale of anti-TB drugs, engaging the private sector in TB control and reducing the loss of patients to follow-up care.

While basic scientific research focuses on innovating new tools and drugs for diagnoses and cures, the value of operational research is that it focuses on the effective utilisation of current resources, knowledge and technologies to address gaps and challenges in disease control. It is an essential tool, especially in low-resource settings, for generating evidence to operationalise public health strategies and inform planning. It engineers local solutions to impact health outcomes.

The new report organises past and ongoing OR studies according to themes and priorities identified by the WHO's Stop TB Strategy, with input provided by leading public health experts in India. As a compendium of two decades of OR, it is expected to be an important resource for public health practitioners, administrators and policy-makers alike.

Experts working on the project also made recommendations regarding areas to be studied going forward, including TB among tribal groups due to the high degree of variation on risk factors, tobacco use and TB, client-centred TB care models and management of drug-resistant TB. The expectation is that the current report is only the first step in creating a knowledge hub to share future findings from OR studies in the context of TB control.

The Joint Secretary, Ministry of Health and Family Welfare, Shree Anshu Prakash, has commended the timeliness of the report, recognising the crucial role that OR will play in formulating cost-effective solutions for health care in India.

Dr Anil Jacob, Policy Officer at the International Union Against Tuberculosis and Lung Disease may be contacted at ajacob@theunion.org for further information or queries.

Operational Research for TB Care and Control in India: Continuity and Change may be downloaded at www.axshya-theunion.org/images/documents/or-tb-care-control.pdf.

About the International Union Against Tuberculosis and Lung Disease (The Union)

The mission of the International Union Against Tuberculosis and Lung Disease (The Union) is to bring innovation, expertise, solutions and support to address health challenges in low-and middle-income populations. With nearly 15,000 members and subscribers from 150 countries, The Union has its headquarters in Paris and offices serving the Africa, Asia Pacific, Europe, Latin America, North America and South-East Asia regions. Its scientific departments focus on tuberculosis and HIV, lung health and non-communicable diseases, tobacco control and research. Learn more at www.theunion.org.

About The Union South-East Asia Office (USEA)

Based in New Delhi, The Union South-East Asia Office works in Bangladesh, India, Indonesia and other countries across the region drawing on a network of consultants and strong partnerships with governments, civil society, corporations and international agencies. Established in 2003 as The Union's first regional office, today it brings global experience and expertise to its work as well as efficiency and energy to The Union's services across the region. USEA has a dedicated staff with technical expertise which reflects the Union's emphasis on tuberculosis, lung health, HIV, tobacco control, non-communicable diseases and research. USEA has developed a strong tradition of working with civil society organisations and a reputation for focusing attention on the needs of the poorest in society.