



#### February/March 2019 Newsletter

Umoya omuhle is a 3 year study that began in 2017 and uses a whole systems approach to look at infection prevention and control for drug-resistant tuberculosis in clinical settings of South Africa in an era of decentralised care.

The name, Umoya omuhle, means good air in Zulu, and embodies the project vision of bringing a 'breath of fresh air' to current thinking on infection prevention and control.

For more information, visit: Ishtm.ac.uk/UO



## WHO updates guidelines for TB Infection Prevention and Control

In advance of World TB Day on March 14, WHO released updated recommendations for TB Infection Prevention and Control.

The guidelines outline a new evidence - based framework that promotes implementation of an integrated package of IPC interventions.

More information here, with systematic reviews from LSHTM's TB Centre here.



#### **NEWS**

Idriss Kallon has written a piece for the University of Cape Town on 'Personal Protective Equipment for Tuberculosis Infection Prevention and Control in the Western Cape: Disjunctures Between Policy and Practice' (Mar 24, 2019)

African innovation highlighted in South Africa with Pelebox smartlockers: Self-service TB medication (Jan 1 2019, The Guardian UK)

SA health system is putting workers at risk of getting TB - unions call for improved conditions and ventilation (Mar 24, 2019, The Citizen)

A human-rights approach is essential to end the global TB epidemic (Mar 24, 2019, Qrius)

Poor ventilation is noted as an issue in South Africa in the article TB patients still shunned by family (Mar 25, 2019, Daily Maverick)

Infection Prevention in Practice has put out a call for papers on IPC relating to HCAI

### **Funding News**

Umoya omuhle has been awarded £199,000 from the Bloomsbury SET group. The funding was earmarked by Research England for activities addressing the challenges of 'pathogen emergence'.

The grant will be used to support the system dynamics modelling component of Umoya omuhle.

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#### **LITERATURE**

Ehrlich et al (2019). Diverse approaches to preventing occupational tuberculosis in health workers: cross-disciplinary or cross purposes? Public Health Action 9(1): 11-14. doi.org/10.5588/pha.18.0086

Escombe et al (2019) *Improving natural ventilation in hospital waiting and consulting rooms to reduce nosocomial tuberculosis transmission risk in a low resource setting.* BMC Infectious Diseases 19:88. doi.org/10.1186/s12879-019-3717-9

Khan et al (2019). *Transmission of drug-resistant tuberculosis in HIV-endemic settings.* The Lancet Infectious Diseases 19: e77-e88. doi.org/10.1016/S1473-3099(18)30537-1

Le et al (2019). *Process measure of FAST tuberculosis infection control demonstrates delay in likely effective treatment.* International Journal of Tuberculosis and Lung Disease 23(2): 401-46. doi.org/10.5588/ijtld.18.0268

Norris et al (2019). Complex health interventions in complex systems: improving the process and methods for evidence-informed health decisions. BMJ Global Health 4: e000963. doi.org/10.1136/bmjgh-2018-000963

Peters et al (2019). Advances in the understanding of Mycobacterium tuberculosis transmission in HIV-endemic settings. The Lancet Infectious Diseases 19: e65-76. doi.org/10.1016/S1473-3099(18)30477-8

Reid et al (2019). *Building a tuberculosis-free world: The Lancet Commission on tuberculosis.* The Lancet. doi.org/10.1016/S0140-6736(19)30024-8

Sima et al (2019). Health care providers' knowledge, attitude and perceived stigma regarding tuberculosis in a pastoralist community in Ethiopia: a cross-sectional study. BMC Health Services Research 19:19. doi.org/10.1186/s12913-018-3815-1

Sahu et al (2019). *After the UNGA High-Level Meeting on Tuberculosis—what next and how?.* The Lancet Global Health. doi.org/10.1016/S2214-109X(19)30068-3



Umoya omuhle staff and supporters on site in South Africa.







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#### **UPDATES FROM THE FIELD**

Sanj Karat releasing carbon dioxide to measure ventilation in a clinic waiting area in South Africa, March 2019.

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**Umoya omuhle** is a collaborative project between the following institutions:













