



## TUBERCULOSIS PROFILE



Although TB remains a serious public health threat in Peru, the country is no longer included in the WHO list of countries with a high TB burden. Peru was the first high-burden TB country to successfully implement Directly Observed Therapy, Short-Course (DOTS), which resulted in a sharp decline in TB incidence from 1991 to 1999. By also pioneering the use of DOTS Plus to combat multidrug-resistant TB (MDR-TB), the country has developed a highly capable specialized health research community.

Although Peru accounts for only 5 percent of the population of the Americas, it has 25 percent of the region's TB cases. According to the *WHO Global TB Report 2006*, Peru had more than 33,000 reported TB cases in 2004, and the reported incidence rate was 120 cases per 100,000 people.

In the past few years, Peru's National TB Program (NTP) has been hindered by serious administrative and funding problems in the Ministry of Health (MOH). These problems led to a deterioration of the TB situation, and in 2004, a reorganization of the MOH created the National Sanitary Strategy for the Prevention and Control of Tuberculosis (ESNTBC) to replace the NTP.

Country population	27,562,391
Estimated number of new TB cases	33,000
Estimated TB incidence (all cases per 100,000 pop.)	120
DOTS population coverage (%)	100
Rate of new sputum smear-positive (SS+) cases (per 100,000 pop.)	66
DOTS case detection rate (new SS+) (%)	83
DOTS treatment success rate in 2003 (new SS+) (%)	89
Estimated adult TB cases HIV+ (%)	3.7
New multidrug-resistant TB cases (%)	3.0

Note: All data are for 2004 except where noted otherwise.  
Source: Global Tuberculosis Control: WHO Report 2006.

### USAID Approach and Key Activities

USAID and the ESNTBC are working together to further strengthen both Peru's DOTS program and its capacity to address MDR-TB. Between 2000 and 2005, USAID funds for TB programming in Peru averaged almost \$400,000 per year.

USAID's assistance includes support for:

- Building capacity for diagnostic laboratory capabilities (including MDR-TB diagnostics)
- Providing technical assistance and training to ESNTBC staff
- Supporting information, education, and communication activities
- Strengthening surveillance
- Supporting operational research

### USAID Program Achievements

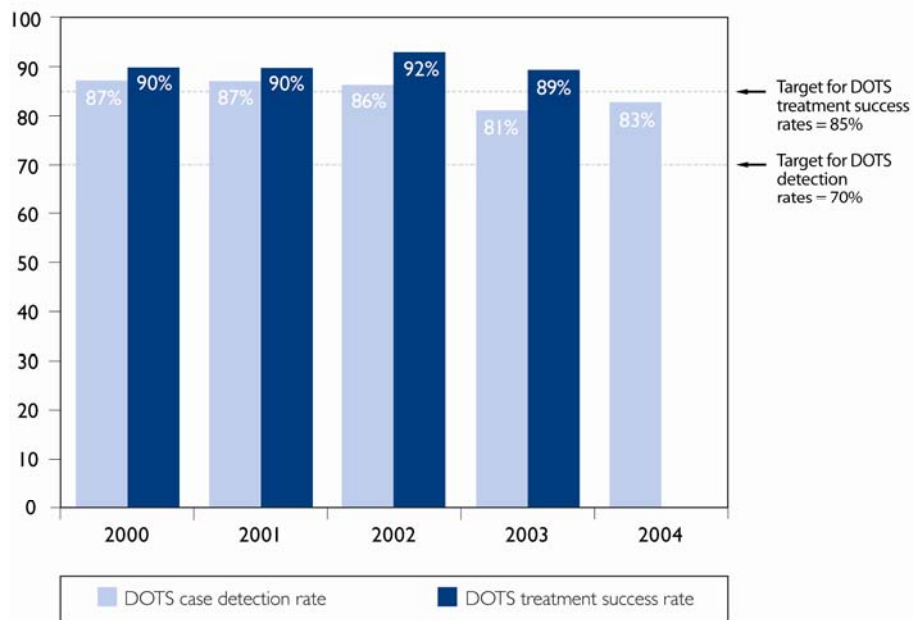
In 2005, USAID supported a study of the TB situation in Peru that is helping the MOH to solve institutional weaknesses in its system. USAID also supported efforts to strengthen the control and management of TB cases through technical

assistance to the DOTS program in five target regions and to the MOH for upgrading national TB guidelines.

USAID's achievements have included the following:

- Prepared a communication plan for ESNTBC
- Supported ESNTBC in the creation of a Stop TB committee
- Revised and published national guidelines for TB prevention and control
- Designed and implemented a study on primary and secondary resistance to TB
- Published the results of a study comparing genetic profiles of *M. tuberculosis* isolated from pulmonary TB patients in Villa Maria del Triunfo (Southern Lima)
- Supported training and implementation of DOTS and of DOTS Plus at the subnational level
- Supported the implementation of USAID's regional South American Infectious Diseases Initiative, which has included sampling of anti-TB drugs in Callao and Lima for quality control

### Case Detection and Treatment Success Rates Under DOTS



Note: DOTS treatment success rate for 2004 will be reported in the 2007 Global Report.  
Source: Global Tuberculosis Control: WHO Report 2006.

### Partnerships

Partnerships have been an important component of combating TB in Peru. Stakeholders such as the Pan American Health Organization and Partners in Health are collaborating with USAID and the ESNTBC on TB prevention and control activities. Partners in Health will focus on treatment and control of MDR-TB. Other partners include the U.S. Centers for Disease Control and Prevention, the Johns Hopkins Bloomberg School of Public Health, the University of Alabama, and Universidad Peruana Cayetano Heredia.