

SUMMARY SHEET		
Agenda Nr. 2.07-6.0	Subject	Subgroup on Laboratory Capacity Strengthening (SLCS): Global Laboratory Initiative - Strategies and Needs
For Information	For Discu	ssion For Decision X

Rationale

Lack of diagnostic capacity is a crucial barrier preventing an effective response to the challenges of TB-HIV and drug-resistant TB, with *less than 5% of the estimated burden of MDR-TB patients currently being detected*. STP Working Groups, technical expert bodies, and international research and donor agencies all agree that the critical lack of laboratory capacity constitutes a problem in urgent need of a solution to reach the MDG for TB and Partnership targets.

Summary

Laboratory constraints centre on infrastructure development, technical issues and human resource development. Novel technologies resulting in rapid detection, identification, and DST of *Mycobacterium tuberculosis* are set to revolutionize TB control, but programmatic implementation will depend on rapid policy translation and adequate laboratory infrastructure. The SLCS is finalizing a strategic initiative, plan and roadmap for the massive scale-up required. This aims at universal access to quality-assured TB diagnostic services by 2015, addressing MDR-TB and TB-HIV diagnostic challenges within the MDG framework. Components of this include:

- Global policy guidance,
- Advocacy and resource mobilization,
- Laboratory capacity development and coordination,
- Quality assurance,
- Coordination of technical assistance; and
- Effective knowledge sharing -

all within the context of integrated laboratory and quality systems and cross-cutting disease control mechanisms. The associated business model rests on a flexible and responsive approach involving comprehensive resource mapping and multi-sectoral partnerships. The core funding is to secure the operations of the Initiative and future payment through a fee-for-service system (e.g. similar to the Green Light Committee financing mechanism) by users. Current gap analyses indicate a global capacity shortfall of 117 million microscopy tests per annum, immediate capacity needs for 15 million culture- and four million DST investigations per year, and a four-fold increase by 2015 to meet the forecast demands of the Global Plan. Estimated associated financial and strategic needs for the period 2008-2015 will require, at the country level:

- At least USD 2.7 billion in laboratory infrastructure and equipment investment;
- At least USD 1.8 billion in annual variable/running cost;
- Training of at least 26 000 new laboratory technicians skilled in culture and DST;
- In-service training of at least 150 000 laboratory technicians on smear microscopy;
- Standardization, coordination and quality assurance of at least 100 000 microscopy and 10 000 culture and DST laboratories.



Decisions requested (from the Stop TB Coordinating Board)

- 1. To endorse and support the strategic direction of the Global Laboratory Initiative;
- 2. To support and advocate for increased resources at the global and country level.

Implications (political/financial/staffing etc):

Increased recognition of the essential role of laboratory services in TB control; massive financial investment to meet the needs; increased staffing at WHO and partner organizations.

Next Steps

Action Required: SLCS business and resource mobilization plan.

Focal Point: Karin Weyer

Timeframe: 31 July 2008