

PUBLIC HEALTH

Agreement Unlocks Loan for TB And AIDS Treatment in Russia

MOSCOW—After more than 3 years of wrangling and delay, a \$150 million loan from the World Bank designed to tackle Russia's burgeoning AIDS and tuberculosis epidemics might at last be on the verge of approval. It has been held up because Russian officials have refused to accept the TB treatment scheme prescribed by Western agencies. But in the past few weeks, negotiators from the World Bank, the World Health Organization (WHO), and the Russian Ministry of Health have apparently settled their differences. "The discussions have now been completed. We've agreed on the basic issues," says Tatyana Loginova, health officer for the World Bank in Russia. "All we're waiting for now is the government to approve the loan."

Speed and thoroughness are the watchwords of successful TB treatment, but Russia's approach has faltered, say observers such as Vinciane Sizaïre, a TB adviser for Doctors Without Borders, which operates a TB treatment program in Siberia. "The approach has been erratic since the early 1990s," Sizaïre complains. As a result, the number of TB cases has soared, reaching epidemic levels in the late 1990s. Government figures suggest that there are 133,000 newly diagnosed cases of TB in Russia every year, with as many as 100,000 of them concentrated in prisons, where almost 30% of patients are infected with drug-resistant strains.

According to Sizaïre, the explosion of drug resistance in Russia is largely the result of poor medical management, scarce drugs, and unfinished courses of treatment. Valentina Shishkina of the Red Cross in Russia,

which treats 10,000 patients with a budget of only \$500,000, estimates that up to 40% of TB patients get irregular treatment, which allows drug-resistant strains to flourish. "The government's approach until recently has been that they don't know exactly how to deal with this," she says. Mikhail Perelman, the Russian government's top TB adviser, acknowledges that scarce resources have been a major problem and that TB mortality rates



Help needed. Patients in a Russian TB prison. About 100,000 Russian prisoners have TB, and drug resistance is a growing problem.

are "unacceptable."

Russia is also struggling with a rising tide of HIV infection and AIDS. Official figures indicate that the number of HIV infections has almost tripled to 200,000 in the past 3 years. But government researchers say many cases are not reported and the real figure is close to 700,000. The World Bank recently warned that the epidemic could reduce economic output in Russia by more than 10% by 2020.

In the late 1990s, the Russian government requested help from the World Bank in dealing with these twin epidemics, and a loan was agreed on in 1999. But Russian officials, including Perelman, advised the Ministry of Health to reject the loan because it stipulated

the use of a TB treatment procedure advocated by WHO known as Directly Observed Therapy Short-Course (DOTS), which requires a very closely monitored antibiotic regimen. The DOTS approach has been adopted by 148 countries and has been especially successful in China and India, where one-third of the world's TB cases reside.

But DOTS conflicts with Russia's traditional approach to TB treatment, which relies heavily on mandatory inoculations, x-ray diagnosis, and isolation of patients in sanatoriums, sometimes for years. Paul Farmer of Harvard Medical School in Boston, who helped design the medical program for the World Bank, said the Russian objections to updated approaches were "frustrating." The stalemate over how to tackle TB, moreover, held up funding from the same loan for AIDS therapies.

There was more to the dispute than simply a culture clash, however. Last year, Perelman said that World Bank stipulations would force Russia to buy drugs from foreign companies, a charge Russian drug company executives had raised in parliamentary hearings. "Russia wanted economic benefits for the drug industry," despite the fact that Russian drug companies lack the capacity to produce the numerous drugs used in the DOTS treatment, says Sizaïre. Olusoji Adeyi, the World Bank's senior health specialist for Russia, says, however, that Russia would be free to use home-produced drugs. "There are no conditions imposed by the World Bank at issue," he says. "There are no guidelines for drug procurement."

Russian officials have finally accepted the DOTS approach. Mikko Vienonen of the WHO Directorate in Russia says that last week's agreement followed a lengthy "process of understanding" that was delayed by numerous administrative hurdles. The Russian Ministry of Health will now recommend that the government pass a special *prikaz*, or order, to harmonize TB treatment with the DOTS methodology. "We are practically almost there," says Vienonen, although he cautions that full government approval will be needed before the World Bank money starts flowing and TB and AIDS patients see any benefit. Vienonen has no idea how long that final hurdle will take to overcome: "I've been in Russia for 3 years working on this," he says. "I've stopped making predictions."

—PAUL WEBSTER

Paul Webster is a writer in Moscow.

CREDIT: IVAN SEKRETAREV/AP