



WHO/SEARO special support to health institutions in Myanmar

Dr Than Zaw Myint, Director General of Department of Medical Sciences, Dr H.S.B. Tennakoon, WR Myanmar, and Rectors of Universities in Yangon viewing the monographs and periodicals presented by WHO/SEARO at University of Medicine 1, Yangon.



As per the guidance of Dr Samlee Plianbangchang, Regional Director, WHO South-East Asia Region, WHO/SEARO has provided special support to seven selected health institutions in Myanmar. The support included "Global Subscription Packages" for 2011 and 2012 for University of Medicine 1, Yangon, University of Medicine 2, Yangon, University of Medicine, Mandalay, University of Medicine, Magway, University of Public Health, Yangon, University of Community Health, Magway, and for the library of the Ministry of Health, Nay Pyi Taw, Myanmar. Each package consisted recent volumes of health related periodicals, WHO technical report series, books, CD-ROMs, etc.

On 29 February 2012, Dr H.S.B. Tennakoon, WHO Representative to Myanmar, officially handed over the WHO "Global Subscription Packages" to Dr Than Zaw Myint, Director General, Department of Medical Sciences, Ministry of Health in the conference room of the University of Medicine 1, Yangon. The handing over ceremony was also attended by the rectors of health related universities based in Yangon along with senior officials from the Department of Medical Sciences.

On behalf of the receiving universities, the Director General of Department of Medical Sciences, who is the overall administrative in-charge of fourteen health related universities in Myanmar, expressed words of appreciation and thanks to WHO not only for

this contribution but also for overall cooperation in health development of Myanmar. ■

World Health Day 2012 "Ageing and Health"

“သက်ကြီးသူတို့ ကျန်းမာဖို့
လူမှုဘဝမြှင့်တင်ဖို့”

World Health Day 7 April 2012 -- Ageing and health - to which each and every one of us can relate - is the theme of this year's World Health Day. Using the slogan "Good health adds life to years", campaign activities and materials will focus on how good health throughout life can help older men and women lead full and productive lives and be a resource for their families and communities.

Over the past century life expectancy has increased dramatically and the world will soon have more older people than children. Populations are ageing everywhere, but less-developed countries are witnessing the fastest change. This social transformation represents both challenges and opportunities. In particular, countries may only have a single generation to prepare their health and social systems for an ageing world. ■ ■ ■

Workshop on reviewing Guidelines on Methadone and Drugs dependency therapy in Myanmar



Dr. H.S.B. Tennakoon, WHO Representative to Myanmar delivering address at the workshop on reviewing revising Guidelines on Methadone and Drugs dependency therapy in Myanmar.

Myanmar has entered its third decade of the HIV epidemic among people who inject drugs (PWID). In 2010, out of estimated 75,000 PWID around 13,000 were reached by harm reduction programmes but in 2011 HIV Sentinel Surveillance report, HIV prevalence among Injecting Drug Users was 21.9% as highest among the most at risk population, while the prevalence for men who have sex with men was 7.8% and for female sex workers was 9.4%. Methadone maintenance therapy (MMT) commenced in early 2006 and in 11 sites, 1227 clients received Methadone in September 2011. However, it is less than 2% of the PWID. The MMT guideline was done in 2004 so it is now an appropriate time for revision of the guideline adapting to the WHO SEARO guideline 2008 with country context.

The workshop was held from 28-29 September 2011 for the discussion of the revision and adaptation. The objective of the workshop was to provide an updated framework for clinical practice to methadone prescribers, dispensers and other health professionals and to review recommendations of (June 2010 and June 2011) methadone workshop to assess achievements and challenges.

Deputy Director General (Disease Control) Dr U Saw Lwin and WHO Representative Dr H.S.B. Tennakoon delivered speeches for the opening session attended by senior government officials. A total of 40 participants: senior psychiatrists from drug treatment centres across the country, UN agencies, National AIDS Programme

(NAP), national and international NGOs, and drug user network representatives attended the workshop.

Various presentations, group works and discussions took place throughout the workshop. Day one primarily focused on current methadone programme assessing achievements. Participants discussed on areas those are related to 2010 workshops recommendations, which have not been achieved. Group work was conducted on 'intake criteria' for methadone patients and the 'Induction Phase'. Based on the above discussions these subjects were decided to be added in the revised Methadone guidelines.

On the day Two, participants reviewed and commented on prescribers and dispensers guidelines, Myanmar. Discussions and group works were done by comparisons between Myanmar Methadone Guidelines (2004) and WHO SEARO Guidelines (2008) and Recommendations were made as follow:

- To revise eligibility and assessment suitability for MMT intake criteria
- To revise induction phase (10 - 14 days) for MMT treatment
- To establish an effective substitution maintenance dose of 80mg to 120 mg per day.
- To give greater emphasis towards promotion of take-home doses for patients that have been assessed for stability.
- To include HIV/TB information from WHO SEARO operational guidelines for opioid dependence for new guidelines
- To include information on opioid dependency/ pregnancy, issue of split dosing (related to pregnancy) and information about monitoring newborn infants (neonatal abstinence syndrome)
- To include information for managing patients with mental illness
- To include information on psychosocial interventions
- To include managing benzodiazepine dependence for the new guidelines
- To include information on managing amphetamine dependence
- To include information on alcohol management based on workshop activity in new guidelines

The Guideline has been drafted by international consultant and after Harm Reduction (HR) troupe's finalization, it is intended to publish in early 2012. ■

Review of the National Tuberculosis Programme



Verifying TB data, North Okkalapa Health Centre

WHO facilitated a joint review mission of the National Tuberculosis Programme (NTP). Ten international as well as national experts conducted this review from 7 to 15 November 2011. The objectives were to assess the progress in implementing the Stop TB strategy and in reaching the TB-related Millennium Development Goals; to review the national TB prevention and control strategy, analyze challenges and opportunities and advise on priority areas and actions for the NTP up to 2015; to identify actions to be pursued by NTP and its implementing partners to ensure sustainability of the programme; and to create enhanced advocacy for increased commitment for TB control at all levels.

The reviewers split into four teams. The following areas were visited: Team 1: Yangon region; Team 2: Nay Pyi Taw, Sagaing and Mandalay Region; Team 3: Bago Region and Mon and Kayin States; Team 4: Shan State (South). The teams visited government facilities as well as project facilities supported by the Myanmar Medical Association (MMA), Population Services International (PSI), the International Organization of Migration (IOM), World Vision, Médecins-sans-Frontières-Holland (MSF-H) and the International Union against Tuberculosis and Lung Disease (The Union).

The reviewers noted the significant progress achieved by NTP. Since the last review (in 2007), NTP has examined more than 1.2 million persons for TB, diagnosed and treated over 630 000 patients and saved an additional 100 000 lives. The NTP has ensured an uninterrupted supply of quality-assured anti-TB drugs at all levels. The quality of programme management, monitoring, supervision and existing services were notable. Extensive training has yielded integration of TB diagnostic and treatment services through basic health staff in all townships. The NTP has engaged private providers at a nationwide scale through partnerships with MMA and PSI, which together contributed 15% of the country's case finding. Pilots for TB/HIV collaboration and MDR-TB services have established the model for the NTP to scale up these crucial services.

Tuberculosis, however, remains among the top killers of adults and more women die of TB than from maternal causes. New activities will be required to reach those not accessing primary health care services or patients with minimal or chronic, less specific symptoms who may be missed currently. All these activities will require significant mobilization of additional resources from both domestic and international sources. ■



Dissemination of Good Clinical Practice on Malaria Research in Myanmar

The workshop on Good Clinical Practice (GCP) was held in Traders Hotel, Yangon on 28-29 February 2012. It was jointly organized by Mahidol-Oxford Research Unit, Departments of Medical Research, WHO Mekong Malaria Programme and WHO Myanmar. Thirty-five participants comprising of researchers and technical staff from Departments of Medical Research (Upper, Central, Lower), Clinical Research Unit (Malaria) of No (1) Defense Services General Hospital, Vector Borne Diseases Control Programme (VBDC) and Malaria Unit, WHO country office in Myanmar attended the workshop.

The GCP is an international ethical and scientific quality standard for designing, conducting, recording and reporting trials that involve the participation of human subjects. The compliance with GCP provides public assurance that the rights, safety, and well-being of research subjects are protected and respected, consistent with the principles enunciated in the Declaration of Helsinki and other internationally recognized ethical guidelines, and ensures the integrity of clinical research data.

In Myanmar, the therapeutic efficacy studies (TES) on anti-malarial drugs which are recommended in National Malaria Treatment Policy has been carried out since 2001. Every year, the sentinel sites for TES are identified in consultation among Departments of Medical Research, Vector Borne Diseases Control Programme and WHO. The recent findings of TES studies indicated suspected evidence of Artemisinin resistance in Myanmar led to development of Myanmar Artemisinin Resistance Containment (MARC) Framework and starting up the implementation of containment effort in selected areas.

In this regard, knowledge as well as compliance on GCP play critical role in providing evidence which will further contribute in strengthening strategies of containment effort. The compliance to GCP in clinical trials serves the foundation for "evidence-based medicine" that is necessary to establish the safety and effectiveness of specific health and medical products as well as the practices.

The workshop focused on the principles of GCP, clinical trial management and monitoring, informed consent, basic principles of good documentation practices (GDP) and Standard Operating Procedures (SOPs) for TES specific techniques. ■



Group photo at the workshop on Good Clinical Practice

important dates

7 April 2012	World Health Day
24-26 April 2012	Regional Meeting on Noncommunicable Diseases, including Mental Health and Neurological Disorders, Yangon, Myanmar
25 April 2012	World Malaria Day
31 May 2012	World No Tobacco Day