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Contact us

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This issue of the newsletter was written and produced by all the members of the staff team.

If you would like to make a donation to TB Alert you can: write a cheque payable to TB Alert & post to above address; donate on-line by going to www.tbalert.org and clicking where it says Donate Now; or call 0845 223 5293 (local rate call from anywhere in the UK) or 01273 234784. THANK YOU.

TB Alert is a Registered Charity
No: 1071886



Introducing our new Chief Executive

TB Alert has achieved much for TB patients over the last nine years, and has ambitious plans to continue expanding its work in the UK and overseas. Over the last two years the trustees realised the need to recruit a Chief Executive to lead the organisation in the next stage of its growth, and this May they appointed Mike Mandelbaum to take on this role.



Mike joined from Marie Curie Cancer Care, where he managed a hospice and a community-based nursing service, and he has previous experience in international development. Mike says:

“TB Alert is a inspirational charity that makes a real difference to many people’s lives, in the UK and overseas. I’m delighted to have joined the enthusiastic and very talented team in Brighton, and I am looking forward to meeting many of our supporters during the coming year. I’m always keen to talk to people to discuss their views about TB Alert or the work needed to help patients and their families. If there’s anything you’d like to discuss please do call me on 01273 234029 or email me at ceo@tbalert.org.”

Making TB information accessible to all

Patients attending a TB clinic are given a lot of information, and since 2003 TB Alert has provided leaflets for people to take home to help them understand and remember what they need to know about TB. The leaflets are also useful for families and contacts to understand TB and what it means for them. But not everyone who gets TB can read English, so we are delighted to announce the translation of all 9 leaflets into 20 languages spoken by people in the UK.

For more information or to order our leaflets see page 9

Thank you from Zimbabwe!

We would like to say a big thank you on behalf of everyone at Murambinda Hospital who have been really touched by the response to our urgent appeal for funds for the TB work at the hospital. So far we have raised £3,000 – enough to pay for a year’s supply of diesel to run the generators during frequent power cuts and provide fuel for the outreach work. If you have not seen the appeal or had a chance to donate you can read it on-line at www.tinyurl.com/ZimTBAppeal.



If you would like to send a message of support to the staff and patients at Murambinda, email fundraising@tbalert.org, and we will pass it on.

What's a Tiny URL???

In many of our stories—including the one above you will see web addresses which start www.tinyurl this is a way of shortening the link so it is easier to read, takes up less space (some links can be VERY long!) and so you don't have to type so much. They all link to full normal websites.

India in Focus - raising awareness

TB Alert projects in India use various methods to raise awareness of TB - including live drama (very popular in villages where there is no electricity); Mobile awareness vans - which show films and include poster exhibitions, advertising hoardings, adverts on the back of buses and much more. Here are some examples ...

Top Centre—This hoarding at Hyderabad Urban DOTS project has cartoons depicting someone with TB (coughing), going to the DOT clinic, and receiving medicine—then lists the addresses of DOT clinics below.



Centre—this Health awareness van is a mobile exhibition unit—with pictorial posters about TB, leprosy, malaria and HIV. The van is taken to public events and celebrations—anywhere that large numbers of people gather together—to raise awareness of local health issues including TB and HIV.

Below left—This drama troupe work in remote tribal areas of Andhra Pradesh. In a shelter with lighting and sound equipment powered by a generator (because there is no power locally) they sing, dance and act stories with a TB theme. Before they start, loud drums and piped music bring people from all over the area to see what is going on. The actors are hilarious, with exaggerated facial expressions, comedy and a few racy jokes — ensuring that the message is memorable as well as informative!



Bottom right—in the evenings the van travels around the urban slums of Vijaywada in Andhra Pradesh and shows health awareness videos. Extremely popular entertainment in an area where people do not have TVs and can't afford to go to the cinema!

Bottom Centre—this poster clearly depicts the symptoms of TB so that it can be understood even by people who cannot read.



Why raise awareness?

In March 2006, India announced 100% coverage of DOTS, a great achievement. Now, for the first time, everyone has a clinic or hospital providing treatment through the government programme in their area. A challenge that remains is to let everyone know what TB is, that it is curable, and where to go for that cure.

Although treatment is free, people don't always know that and often go to local healers or just hope they will get better because they think they cannot afford to go to a doctor. Adding to this the fact that people can risk losing jobs or being ostracised by their family if they are known to have TB, and case detection rates in India still have some way to go to meet the WHO recommended levels of 70% in some states.

TB Alert's work in India focuses on raising awareness; increasing case detection; and tackling the stigma and discrimination which prevent people coming forward. Our projects also aim to improve access to treatment , as well as ensure more people finish their course of medicine. Once fully cured, individuals will then have the opportunity to carry on with their lives as productive members of the community.



New work in India - working with children with TB/HIV

You may know that India is the country with the highest burden of TB, but did you know that it also has a significant problem with HIV?

Our partner, Vasavya Mahila Mandali (VMM), works in the slum areas of Vijaywada in the Krishna district of Andhra Pradesh where antenatal studies show 4.6% of pregnant women

are HIV+. 30-70% of HIV deaths in this area are from TB, so it is vital that our partners combine TB and HIV awareness, diagnosis and treatment activities.

VMM, which is run by an amazing family of women, has a particular focus on working with women and children. TB Alert is working with VMM as well as

another organisation in Hyderabad to develop projects to promote early diagnosis & treatment of paediatric TB particularly among orphans, children with HIV and children living with HIV positive parents.



Anusha's story

Anusha (the little girl with plaits and red ribbon) is HIV positive. She had TB two years ago and she wouldn't have had the medicine she needed had it not been for VMM, and probably would have died. (Free TB treatment for children has only been available for a year here because the focus was on infectious, smear positive TB, and children are not generally smear positive). Anusha is shown here with Dr Deeksha and some of the other children supported by VMM. Anusha is an orphan and lives with her granny.

VMM have reached over 3,000 children affected with or living with HIV over the years. By supporting them to include TB as a major part of their work we hope to identify and cure at least 100 children with TB each year.

New work in India - working with TB in tribal communities



Pushpa (far left, shown with her mother who is holding Pushpa's 2 month old daughter) is a very important person in her village (Melsapili). Pushpa has had basic health training, and gives first aid—vital in a village which is 45 minutes from the nearest road and a further hour from the nearest clinic. Pushpa has the only phone in the village and once a month she walks down to the road to meet with a nurse from the nearest clinic who gives her medicines and immunisations to take back to her community.

TB Alert India and our local partner RISE has been consulting with tribal people from villages like Melsapili to find out what people

know about the major diseases like TB, HIV, leprosy and malaria and how we can help to provide appropriate outreach services for villages like Melsapili.

Over the next year we hope to start providing health awareness and education for people like Pushpa (and Kolondi—below) who in turn will be able to educate people within their communities. They can be the eyes and ears for the needs of the village—identifying TB, leprosy and malaria patients, acting as Directly Observed Treatment supervisors and motivating patients to keep on taking their medicine.

Tribal Communities in India

12-13% of the population of India are tribal, with different languages, cultural practices and religion than the rest of the country. Tribal peoples live in hills, plains and forest areas which are remote and inaccessible. Being so far from clinics and hospitals they often rely on traditional healers like Kolondi (right) when they are ill. As many are not officially recognised by the government of India as scheduled tribes they often lack access to basic services such as health, infrastructure and schools. TB Alert's partners focus on working with the most stigmatised and marginalised tribes.



Active Case finding in Malawi

One of the major problems facing the Malawi National TB Programme is the low TB case detection rate. The World Health Organisation estimates that Malawi is only detecting 39% of smear positive TB cases and 46% of all forms of TB. This is way below the global target of 70%. The other major challenge is high mortality rate (16%) among TB patients particularly due to the high HIV rates among TB patients (70%) and also due to late presentation to health facilities by TB suspects for TB diagnosis and treatment.

This TB Alert pilot project, based in Mzimba district in Malawi, was set up to screen for TB in adults and children living in a household of an index smear positive TB patients*. The idea is to detect TB cases early (before people are so ill that they lose time at work or school) which reduces the period they are infectious (and therefore the number of people they pass their TB on to). Also, people at extremely high risk of contracting TB (children under 5 and those with HIV) are given preventative treatment. The government of Malawi has been impressed with results so far, and it is possible that this method will be taken up by the National TB Programme—meaning that TB Alert’s work will have positive effects all over Malawi.

Results so far

Out of the 1,078 household contacts screened for TB 21 (2%) were diagnosed with smear positive TB. This is actually at the higher end of the expected ratio (see below). The figure of 21 may look small but when considering that one smear positive TB patient not treated for TB can infect at least 15-20 others in a year these results have major public health impact. Essentially up to 400 people could have risked contacting TB from these 21 patients.

A total of 186 children have been started on IPT (Isoniazid Preventative Therapy to prevent TB). These drugs are extremely safe for children, and as children are at extremely high risk of contracting TB from a family member, and TB in children is difficult to diagnose and can quickly be fatal, this is a real case of “prevention is better than cure” in action.

240 people have been tested for HIV, with 116 (48%) testing HIV positive. All of these have been started on CPT (co-trimoxazole preventive therapy—a low-cost, therapy which prevents several secondary bacterial and parasitic infections), and 66 (57%) have been started on ART (Anti-retroviral therapy—improving quality of life and greatly improving survival for people living with HIV).

William’s story



William Chisale

William Chisale is three years old. He lives in a village in northern Malawi with his parents, two brothers and one sister. He is the only child under the age of 5 years in the family.

William’s parents, Mr and Mrs Chisale run a small business selling tomatoes at Mzimba local market.

Mr and Mrs Chisale are both HIV positive. Two weeks after starting treatment for HIV infection, William’s father started coughing. He went to Mzimba district hospital to seek treatment for his cough. The doctors suspected TB and took a sputum sample which confirmed that he had sputum smear positive (infectious) TB. On the day that Mr Chisale started TB treatment, he was approached by a team of healthcare workers from the TB

Alert contact tracing project to identify members of his household members or other close contacts who he may have infected with TB.

All the other 5 members of the household were screened for TB and no one was found with active TB disease. However because children under 5 are more susceptible to TB William was started on Isoniazid, to help him fight off any TB germs that he may have breathed in from his father and prevent the development of TB.

In the absence of this TB Alert project, William would not have received the treatment and his risk for developing active TB would have greatly increased. We can never say what would have happened if he didn’t get the preventative medicine – but we know that for every 10 children like William we can treat to prevent TB we are saving at least one child’s life.

* Two studies in household contacts in Malawi, one country-wide and one based in Mzimba district, have confirmed high rates of tuberculosis in household contacts of patients with TB. In these two studies, the annual rate of TB was between 1000 – 2000 per 100,000 per year (1-2%) in household contacts of index TB patients compared with 350 per 100,000 per year in a control group of households with no index case of TB.



The UK Coalition to Stop TB

In March of this year, TB Alert met with other key stakeholders in the UK TB sector to discuss the low levels of awareness in the United Kingdom regarding the global TB epidemic. Discussions led to the forming of a new pressure group, the UK Coalition to Stop TB. The Coalition has been formed to raise the level of media attention, political will and public awareness around TB in the UK. Through a unified voice and co-ordinated actions, the Coalition's aim is to generate greater awareness and understanding of the disease and to mobilise stronger public, political and media support for an effective and sustained response to the global TB epidemic.

The Coalition launched around World Stop TB Day with a letter to The Times. Following the launch, the Coalition was successful in securing coverage in the national media regarding the Global TB/HIV Leaders Forum which took place at the UN in New York in early June. Lucy Chesire (right), the Kenyan TB/HIV advocate and the driving force behind the

declaration of a TB emergency in Africa in 2005, was featured on Radio 4 Women's Hour and in The Guardian commenting on the joint epidemic.

Currently discussions are taking place, with the help of healthcare, public sector and communications agency Munro & Forster, regarding a concerted campaign of press work and lobbying. We hope that the campaign will secure a greater understanding of global TB issues and enhanced commitment from policy makers in the UK.



*Lucy Chesire during a radio interview—
photo courtesy of ResultsUK*

The UK is the Odd One Out

Several research papers published in recent years have forwarded the commonly held view that, over the past decade, many industrialised countries have been experiencing a re-emergence of TB, particularly in cities and in immigrant populations.

Research carried out by TB Alert has shown that the UK is the only Western European country, and London the only European capital city to be experiencing a sustained increase in TB cases.

Data collected from EuroTB* and its participant members showed that the general trend of TB rates from 1995-2006 in the EU countries analysed was actually downwards. BCG policy varied in many member states and was removed as a factor.

*We hope the full findings will be published in a scientific journal in the near future. If you would like to see a copy of this research please email Tina Harrison on awareness@tbalert.org.

Patient Support Fund—making sure that people with TB are supported through their treatment

Thanks to our kind donors Oxford Immunotec, the Margaret De Sousa Deiro Fund, The Maitland Trust, Pace Micro, and Lilly UK, our Patient Support Fund (which used to be known as the Hardship Fund) is helped more patients than ever before. We thought you would like to hear one of their stories

Patient J works in the food industry and lives with his wife and their three small children. He was initially diagnosed with TB in November 2007, and later started treatment for MDR-TB on 1st of January of this year.

J has worked his whole life and has never claimed benefits before.

As he was unable to work, he applied for benefits but did not hear back for a long while. Eventually he was told that owing to a gap in his National Insurance contributions, he would have to apply for a different benefit. His entitlement eventually came through after 4 months, although at the time of applying for the grant, J was still struggling to get this back-dated.

J used the £150 Patient Support Grant he received via his TB nurse to help pay for food and transport costs to appointments (he needed IV antibiotics three times a week) while he was unable to work.

Since January this year TB Alert has helped 55 people like A, with grants totalling over £8,000.

Grants have ranged from £50 to £500, for items including: nutritious food (meals on wheels while the patient is extremely poorly or hot meals in the hospital canteen for a homeless person), bus/train fares to clinic (taxis for those too ill to use public transport): furniture/kitchen essentials for homeless people moving into unfurnished houses; and mobile phone and top-ups for patients to keep in touch with their nurse or DOT provider. Help like this makes a real difference to motivate and support patients through their treatment.

Giving Evidence to The Lords

TB Alert recently gave evidence to a new Select Committee of the House of Lords, the Ad Hoc Committee on Intergovernmental Organisations, established in November 2007. The Committee's remit is to "consider how contemporary issues of international policy are addressed through United Kingdom membership of intergovernmental organisations (excluding the European Union), including their value for money."

The Committee's inquiry was focused on the global spread of communicable diseases and the importance of international action to control the spread of diseases such as HIV/AIDS, Tuberculosis, Malaria and Avian Influenza. The inquiry was to assess the overall effectiveness of intergovernmental action in these fields and explore the synergy with which the various organisations involved are operating.

Along with other key stakeholders in the UK, including the International HIV/AIDS Alliance, Terence Higgins Trust, Target Tuberculosis and the Malaria Consortium, TB Alert submitted written and oral evidence, highlighting international issues such as the current shortfall on achieving the Millennium Development Goals for health and the importance of the UK government prioritising long-term, sustainable investment in health systems in developing countries.

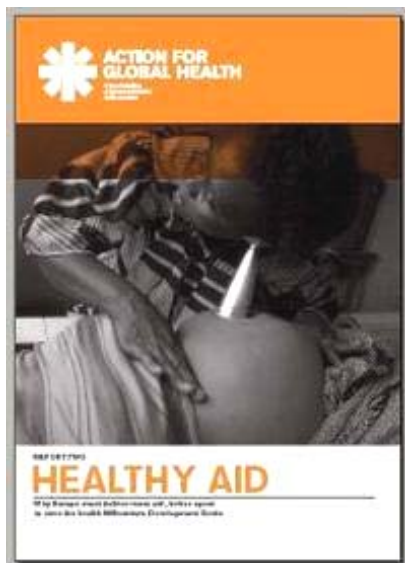
We also highlighted UK issues, such as the need for improved laboratory culture facilities in order to achieve faster confirmed diagnoses, access to the NHS for those with TB without legal residency status and the evidence base about pre-entry TB screening for those in certain high incidence countries applying for visas to enter the UK.

The findings of the inquiry were published in the report "Diseases Know No Frontiers: How effective are Intergovernmental Organisations in controlling their spread?"

Lord Soley, Chairman on the Committee said at the report launch: "We have been impressed by the increased international resources and commitment which are now being devoted to controlling infectious disease and we hope this will continue and grow. However, for that to be effective it is vital that there is sufficient surveillance of disease outbreaks to limit their spread. We also felt there should be more focus on improving health systems in the developing world generally, as without improved health facilities it will be far more difficult for current treatment campaigns to take root and for serious infectious disease outbreaks to be identified and dealt with when they occur."

To view the report online, go to www.tinyurl.com/TBevidence

Action for Global Health Network Launches its second Policy Report:



View the report online at: www.tinyurl.com/TBReport

Over 60 people, representing Parliament, governmental and civil society organisations, media and private sector, attended the launch of the second Action for Global Health Policy Report held at the House of Commons this June.

The event was co-hosted by Christine McCafferty MP, Chair of the All-Party Parliamentary Group (APPG) on Population, Development and Reproductive Health and Neil Gerrard MP, Chair of the APPG on AIDS, with presentations from Gareth Thomas MP, Parliamentary Under-Secretary of State for the Department for International Development, Christopher

Chabu Kangale, Acting Director of AIDS Alliance Zambia and Bruno Oudmayer, Chief Executive of Interact Worldwide. Nick Herbert MP and Co-Chair of the All-Party Parliamentary Group on Global TB opened up the discussion.

The Report, entitled *Healthy Aid: Why Europe Must Deliver More Aid, Better Spent to Save the Health MDGs*, calls on the UK and European governments to increase efforts to support developing countries to achieve the health Millennium Development Goals (MDGs) by 2015, by increasing the amount of aid allocated to health and improving aid coordination mechanisms. Based on evidence from case studies from six countries in Africa, Asia and Latin America, the report makes recommendations on how Europe could improve mechanisms to ensure progress in achieving global health goals, particularly maternal and child health, HIV/AIDS, TB and Malaria.

Responding to the Report, Gareth Thomas reiterated DFID's pledge to spend £6 billion on improving health systems and services in developing countries up to 2015, recently announced by Douglas Alexander, Secretary of

TB unprecedented attention at the International AIDS Conference in Mexico

TB received unprecedented attention at the recent International AIDS conference held in Mexico City in August. This was a breakthrough for international TB advocates as TB, albeit a preventable and curable disease, still remains the leading cause of death among People Living with HIV (PLHIV) after over 25 years fight against the HIV/AIDS epidemic.

In the opening ceremony, Peter Piot, Executive Director of UNAIDS and Margaret Chan, Director General of WHO, stressed the urgent need for collaboration between TB and HIV services. Kevin de Cock, Director of the WHO HIV/AIDS department, also warned that the slow progress in TB/HIV collaborative activities was hindering countries to achieve the universal access of TB services to PLHIV.

Their words were joined by other voices from all over the world calling on the AIDS community to ensure the implementation of WHO recommendations on TB/HIV collaborative activities, particularly the Three I's strategy, which includes isoniazid preventive therapy, intensified case finding, and TB infection control.

TB activists and PLHIV demonstrated for the first time at an international AIDS conference condemning the fact that only 1% of PLHIV worldwide are screened for TB infection. TB must no longer be addressed as just another opportunistic infection, they shouted. Vuyiseka Dubula, from Treatment Action Campaign criticized inadequate government responses to TB/HIV co-infection, particularly in terms of TB/HIV research issues. Dr. Jeremiah Chakaya, from the Centre for Respiratory Diseases Research, Kenya, called for collaboration between TB and HIV national programmes to ensure effective implementation of the Three I's strategy.



Throughout the week, a photographic exhibition sponsored by WHO and the Stop TB Partnership reminded passers-by of the daily plight faced by the people and families affected by TB/HIV co-infection. The photos were displayed in an authentic South African township shack (above), which ironically contrasted with the surrounding sophisticated pharmaceutical companies' commercial stands. The exhibition depicted the dire socioeconomic conditions and stigma associated to TB and AIDS.

All these voices challenged the AIDS community to use its experience in addressing inequalities and gaps within the HIV/AIDS response to concentrate on the TB/HIV co-infection where it is most urgently needed: at the hospitals and health care services in HIV high-burden countries.

Weak health systems hinder the scaling up of universal access to TB and HIV services. If HIV/AIDS epidemic had revealed gaps within health systems, TB/HIV co-infection points to the steps needed to strengthen health systems: collaborative work and, when applicable, integration of programmes. However the lack of consensus on how to put this collaborative work, such as the Three I's strategy, into action shows the need for further dialogue between the TB and HIV/AIDS worlds.

.... "Healthy Aid"

State for International Development, during a recent launch of the UK government's AIDS Strategy. Gareth Thomas also stressed the importance of supporting the engagement of women groups in health strategy planning processes and health delivery services.

Christopher Kangale emphasised the importance of improving aid coordination at recipient country level and supporting the engagement of civil society to strengthen governance mechanisms that hold governments accountable for the way donor aid is spent. He also stressed that investments in the strengthening of health systems should not result in money being drained from responses to priority diseases, such as TB. He pointed out how in Zambia, the creation of pool funding system for general health issues in 1995 contributed to the collapse of the TB programme.

TB Alert is a partner of Action for Global Health (AFGH), a network of 15 European non-governmental organizations based in Brussels and five European countries (France, Germany, Italy, Spain and the United Kingdom).

AFGH monitors how the actions and policies of European governments affect health in developing countries, and aims to influence decision-makers to improve their practice, and support developing countries to achieve the health Millennium Development Goals.

TB Alert launches new TB Awareness Raising Service for PCTs

People who have TB in the UK are mostly people who experience social, racial and economic disadvantage and are among the group most likely to experience health inequalities. They are often positioned outside mainstream TB services. The PCT awareness raising programme will be focused on providing PCTs with current evidence based awareness raising materials and strategic tools that can be commissioned to address this issue.

Over the past 20 years London has experienced the majority of the national increase in TB, but in 2007 the capital's share reduced to 39% of cases. In contrast, we have seen regional increases. In 2006 there was a 27% increase in the South East and an 11% increase in Yorkshire and Humber, while in 2007 there was a 37% increase in the North East.

One of the ways identified by the Department of Health to reduce TB at local and national level is to provide increased awareness of TB in appropriate and accessible ways, which address the social health circumstances of people with or affected by TB.

In 2007 the Department of Health published the *TB Toolkit for Planning, Commissioning and Delivering High-Quality Services in England*, which identifies TB Alert as a key source of advice to PCTs. To strengthen this advice role the Department has funded TB Alert to develop a dedicated PCT awareness service, including the provision of a dynamic package of current evidence based cultural and contextually appropriate TB awareness raising materials and strategies.



The service will offer PCTs the opportunity to commission not only awareness raising materials but models of best practice and community engagement strategies, designed to reduce TB

prevalence among local communities who experience significant rates of TB. The package will be available for PCTs to commission in early 2009.

Our PCT resources and strategies will be cost effective, sustainable and appropriate in addressing the complex needs of people with or affected by TB in their local area. The package will be used to strategically build capacity, raise awareness and strengthen organisational and public knowledge of TB, to ensure people with or affected by TB have access to appropriate health and social health care

Whether PCTs currently find themselves in high, medium or low prevalence TB areas, cost-effective, efficient and appropriate awareness strategies and resources play an important role in addressing the burden of undiagnosed disease, reducing the levels of onward transmission and tackling issues of stigma and health inequality locally.

Our approach is to apply a clear and current evidence base to develop models tailored to local demographics, which will build capacity and add value to local TB expertise and knowledge.

TB Alert's dedicated PCT service will go some way to ensuring key communities will access local TB services that will lead to early diagnosis and a healthy life.

To discuss commissioning services for your PCT or to find out more about the project, please contact: Linda Connor, PCT Services Manager on 01273 234028 or linda.connor@tbalert.org

World Stop TB Day Feedback—thank you all!

This year we had a record breaking 141 teams (33 more than last year), holding World TB Day events in 387 locations, up and down the country. Huge thanks to everyone who took part and helped make the general public more aware of TB.

Special thanks to Genus Pharmaceuticals for sponsoring our materials, which enabled us to extend

our range to include coasters and bags this year. In total we dispatched over of 78,500 awareness raising materials including 25,000 symptom postcards, 25,000 pens, 5000 symptom cards for GPs, 6,500 balloons, 5,000 coasters, 8,500 bags and 3,500 posters, thanks to our Global Xchange volunteers Clara Egwuigu and Robert Woodward, who worked tirelessly ensuring all the

materials were sent out on time.

Next year we want to have even more teams holding events around the country—with your help this could be possible. So please let us know your World TB Day plans as soon as possible, it's never too early to let us know, but it can be too late!



RSM Meeting - Manchester November 2008



WHERE? the Postgraduate Education Centre, Manchester Royal Infirmary

WHEN? Thursday 20th November.

WHAT? 'Tuberculosis 2008' - This TB talk is organised by Dr Mark Woodhead and Professor Peter Davies in conjunction with RSM: Respiratory Medicine Section, TB Alert, the Manchester Medical Society and the Liverpool Medical Institution.

The meeting is suitable for nurses involved in TB management, general practitioners, hospital physicians, microbiologists, public health doctors and anyone else involved in the care of TB patients and their families.

There are a wide range of topics scheduled for discussion, including; The History of TB Treatment, TB commissioning and the TB toolkit, TB in prisoners / offenders, Interferon gamma test update and XDR-TB. These talks are provided by an impressive selection of speakers and a TB expert panel will also be answering your questions.

To view the full programme and registration form go to: www.tinyurl.com/TBmeeting08

Translated Leaflets—prices and how to order

We are delighted to announce that thanks to a donation from Genus Pharmaceuticals, TB Alert's clinical information leaflet series has now been translated into a variety of languages, as part of our aim to raise awareness of the disease and increase access to treatment for all.

General	Tuberculosis: Your Questions Answered
Vaccination	Tuberculosis and the BCG Vaccination
Diagnostic Tests	TB and its Diagnosis
Treatment	Tuberculosis Treatment
Drugs Information	Rifater, Ethambutol, Pyrazinamide and Rifinah
Tracing	Contact Tracing and Screening Tuberculosis
Latent TB	Latent Tuberculosis Infections Treatment
MDR TB	Multi Drug Resistant Tuberculosis
HIV Testing	An Important Test for People who have TB

To see these materials in English on our website go to www.tinyurl.com/TBleaflets

The series covers all aspects of TB information and each leaflet serves a specific purpose, to help explain, inform, reassure or remind. TB nurses can use the leaflets to back up the information provided by themselves or other health care specialists, as well as providing important information for the patient to take away and read at home.

These information leaflets are now available in printed form in **English, Somali, Urdu, Gujarati and Tamil.**

Printed leaflets are priced at £12.50 per 100 plus postage and packaging.

In addition to this, the information leaflets are available in PDF format in the following languages: **Albanian, Bengali, Chinese (Simplified), Farsi, French, Greek, Italian, Pashto, Polish, Portuguese, Punjabi, Romanian, Sorani, Spanish, Turkish and Vietnamese.**

These PDFs are provided on either a 1 or 3 year license. On a 1 year license the price of an individual leaflet is £25 and the complete series of 9 leaflets is £165. On a 3 year license the price of an individual leaflet is £55 and the complete series is £360. This provides the license holder with the opportunity to print as many copies of the materials as they need. The price is also



inclusive of material updates, which will occur in event of significant developments, within the specified license period.

We hope that you are excited as we are, here at TB Alert, to be able to provide members of the communities most affected by Tuberculosis with information materials in their preferred language.

To access the order form for these materials go to www.tinyurl.com/TBleaflets

Allie pounds the pebbles for TB Alert

Some fundraisers do pretty impressive things to raise money for charity. Probably our most extreme sports person so far is Allie Lucas (an endurance runner who has run some mad sounding endurance races including the Tough Guy, the Man versus Horse and the Race the Train!), who told me her story....

"On March 9 2008 I ran the Grizzly Cub Run to raise funds for TB Alert. The 'Grizzly' is a 20-mile-ish, multi-terrain event which competes for the title of 'toughest race in Britain'; it takes you through bog, vertical hills,

cliffs, the sea and strength-sapping stretches of pebble beach (see photo). I have done this race 7 times.

For the cissies, injured and under-trained, the organisers also put on a 'fun-run' - about 9-10 miles of similar terrain called the 'Cub Run'. Due to illness I opted for that this year. The Cub Run doesn't (quite) take you into total edge-of-endurance mode like the main Grizzly race does. At the finish you get hosed down by the Seaton Fire Brigade to wash off all the mud – which is a nice treat!"

If you are inspired by Allie and the others who have taken on challenges to raise funds for TB Alert contact Melanie (details below) - we have charity places in a number of events (they aren't all this exhausting!)

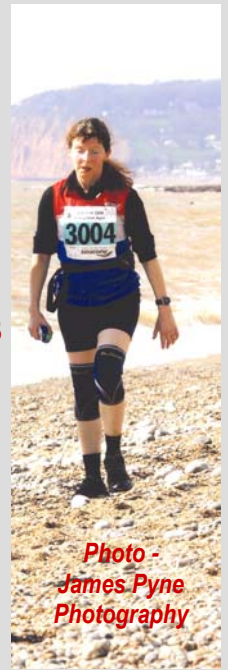


Photo - James Pyne Photography

Kilimanjaro Challenge in the City

Staff at Macquarie Group in the City of London climbed 10 times the height of Mount Kilimanjaro (Africa's highest peak, at 19,340ft) on step machines for TB Alert in April this year.



Over 100 staff took part in teams, competing to see which team could reach the "summit" first. A frenzy of fundraising accompanied the event, resulting in over £9,000 in donations, which was then generously matched by the Macquarie Foundation. The teams also climbed to support their colleague Carl, a former TB patient, who plans to climb Kilimanjaro for real to raise more funds for TB Alert.

TB Alert has lots of ideas for events within companies - teambuilding, fun and support for TB Alert! If your company would like to put on a fundraising event, please contact Melanie (details below)

Biking to Brighton

On Sunday 1st June 2008, five bikers defied cramp, dehydration and aggressive motorists to cycle from London to Brighton to raise money for TB Alert. Led by Himanshu Dalal of North London, the team cycled for 7 hours and managed to raise a fantastic £2,300, with money still rolling in!

8 years ago Himanshu Dalal, then a 17-year-old college student from North West London, was diagnosed with TB. Now, back to full health, Himanshu leads a very active lifestyle and particularly enjoys cycling. At the end of the ride, a jubilant Himanshu told us:

"I am really grateful to everyone who supported me during my illness and would really like thank my fellow riders for helping raise this fantastic amount of money."



Cyclists Bhavin Dalal, Himanshu Dalal, Nita Bassi, Amjad Parkar and Richard Crunden, with a member of their support crew, Austen El-Osta.

To contact us about any item on this page, please email fundraising@tbalert.org or call Melanie on 01273 234784.



Walking the world for TB!



Lilly Capastat manufacturing team and scientists

In May Lilly UK employees joined colleagues around the world in the *Transfer of Hope Walk*. Starting at sun up in New Zealand and continuing across more than 35 countries until sundown in the western United States, the walk aimed to raise money and awareness for Multi-Drug Resistant TB.

The company pledged money per employee mile to support TB charities worldwide up to a total of £25,000. Locally at Speke, over 200 employees walked the factory perimeter of 2 miles with the TB drug manufacturing team and scientists going that bit further - walking from the site to the Pier Head to raise funds for TB Alert. Employees raised £1000, which was matched by the company's payroll giving scheme.

£1 on the bill success

Restaurants across the country raised funds around World Stop TB Day this year in the TB Alert £1 on the bill campaign. The restaurants involved had great feedback from their customers and were really enthusiastic about this new way to support a charity with local connections (restaurants were based in Sussex, near TB Alert's office, or had personal connections with TB health professionals or people who have had TB).

There are too many to mention them all but we would like to give a special thanks to the staff of *Momma Cherri's Big House* in Brighton who raised the most at £377!



Volunteer Clare Mayers at the Bengal Palace in Seaford (photo supplied by Seaford Gazette)

Dedicated followers of fashion

In April this year the Soroptimist International club of Dewsbury held the final event of President Kate Currie's year fundraising for TB Alert – a Fashion Show at their local Parish

Church. Some beautiful clothes were modelled, along with accessories from designer Diva of Ackworth.

Dewsbury and District Hospital involves dealing with patients who have TB.



A willing volunteer accompanies Diva of Ackworth model down the catwalk!

In the second half of the show models were accompanied by one or two gentlemen in evening dress, echoing the first event of their fundraising year "Ladies who Lunch" where gents in tuxedos served a picnic lunch to lady walkers.

The ladies (with help from their gentleman friends!) raised over £3200 for TB Alert. Kate told us:

Kate chose TB Alert as the charity for year in office because her grandfather died from TB and her husband's work at

"I've had a thoroughly enjoyable year as President of SI Dewsbury and was delighted to help such a worthwhile charity. I hope we have raised awareness as well as creating a talking point around issues relating to TB. I'd like to wish all the staff at TB Alert continued enthusiasm and success and to thank them for their incredible support".

Smiles of Joy this Christmas!

TB Alert Christmas Cards are now available - call us if you didn't receive our 2008 brochure or buy on-line at www.tinyurl.com/TBcards08 where you can buy from our full range (including previous year's cards).

As well as some new seasonal images we are introducing a stunning new photographic card (right). The card, called "Smiles of Joy" shows children in Zimbabwe, at the TB Alert funded Grassroots Theatre Project, which raises awareness of TB and HIV through music, theatre and dance. We felt that the happiness on these children's faces despite the difficulties Zimbabwe is facing at the moment gave a wonderful sense of hope.



Smiles of Joy can be used as a Christmas card or a notecard as there is no printed greeting inside.

Our thanks to photographer Kristian Helgeson who donated this image, as well as our kind sponsors Genus Pharmaceuticals and Oxford Immunotec who covered all the printing costs so every penny could go to our work.



A Rose against TB - an ideal gift

If you are stuck for gift ideas this Christmas, or for a special birthday or anniversary, why not try a rose? The Gladys Quine Rose, is a special rose to raise funds for TB Alert.

Francesca Quine (left) wanted to find a way to commemorate her grandmother Gladys who died of TB. As Gladys had loved gardening, and roses especially, Francesca decided to name a rose after her, and as a lasting tribute, make it a charity rose for TB Alert.

Francesca told us: "The Gladys Quine rose is a beautiful flower, starting off deep apricot in bud and turning paler in bloom. It produces a mass of blooms over a really long flowering period throughout the summer and makes an ideal gift that will give years of enjoyment".

Potted plants can be delivered by a courier until 19th December, bareroot roses can be delivered up until 12th December. Just call World of Roses on 08452 606888 or go to www.tinyurl.com/TB-Rose to buy on-line.

It's your call ...

TB Alert has formed a partnership with The Phone Co-op to offer supporters a great deal on phone calls, line rental and broadband.

Not only can you benefit from The Phone Co-op's low cost services and great levels of service (real people on the end of the phone!), but TB Alert will receive a regular monthly income relating to how much you spend (don't worry - it won't cost you a penny more and you could save significantly compared to other providers).

Owned and democratically controlled by its customers, the co-operative is the perfect option for anyone seeking a more ethical and environmentally responsible telecoms supplier which prioritises good value and customer service.

What's more, TB Alert will receive an additional one-off £5 payment for every TB Alert supporter who signs up before the end of October 2008.



The Phone Co-op was highly rated by readers of Which?

Magazine for its standards of customer service. Their line rental and mobile services are both rated a 'Best Buy' by Ethical Consumer magazine and their broadband service is also recommended.

To find out more, visit www.thephone.coop or call Henry or Doug on 0845 458 9040 ensuring that you quote AF0202 TB Alert.

To contact us about any item on this page, please email fundraising@tbalert.org or call Melanie on 01273 234784.