

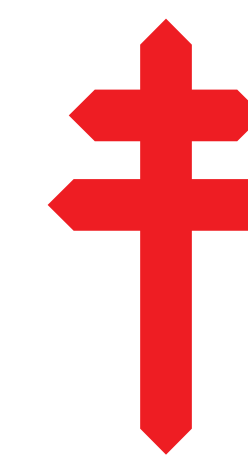
BELTA-TBnet, an initiative to improve the financial accessibility of tuberculosis treatment in Belgium

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BELTA

All tuberculosis (TB) patients should have access to free anti-TB treatment.
BUT... not every patient has!
BELTA-TBnet must ensure that there are no financial barriers to TB treatment.

BELTA-TBnet

- A special project created by Royal Decree (10 March 2005)
 - Funded by the Belgian federal government
 - Implemented by the Flemish Association for Respiratory Health and Tuberculosis Control (VRGT) for the Flemish region and the Foundation for Respiratory Health (FARES) for the French speaking region since December 2005
 - Picks up the TB patients who fall through the meshes of the social security net.
- Two target groups:
- TB patients without health insurance coverage;
 - MDR patients (because most of the very expensive second-line anti-TB drugs are either reimbursed partially [amikacin, fluoroquinolones] or not reimbursed at all [thioamides, cycloserine, capreomycin, PAS] by the national health and disability insurance)

Expected results:

- More patients put on treatment
- More patients completing treatment
- higher cure rate
- decreased transmission of the TB bacillus
- reduced risk of creating multi-drug resistant (MDR) TB

IMPLEMENTATION

▶ From 1 December 2005 to 31 December 2006, a total of 159 BELTA-TBnet patients were registered. This represents 12.2% of the total number of TB patients in Belgium in the calendar year 2006 (138 out of 1130). The reason for registration is shown in [table 1](#).

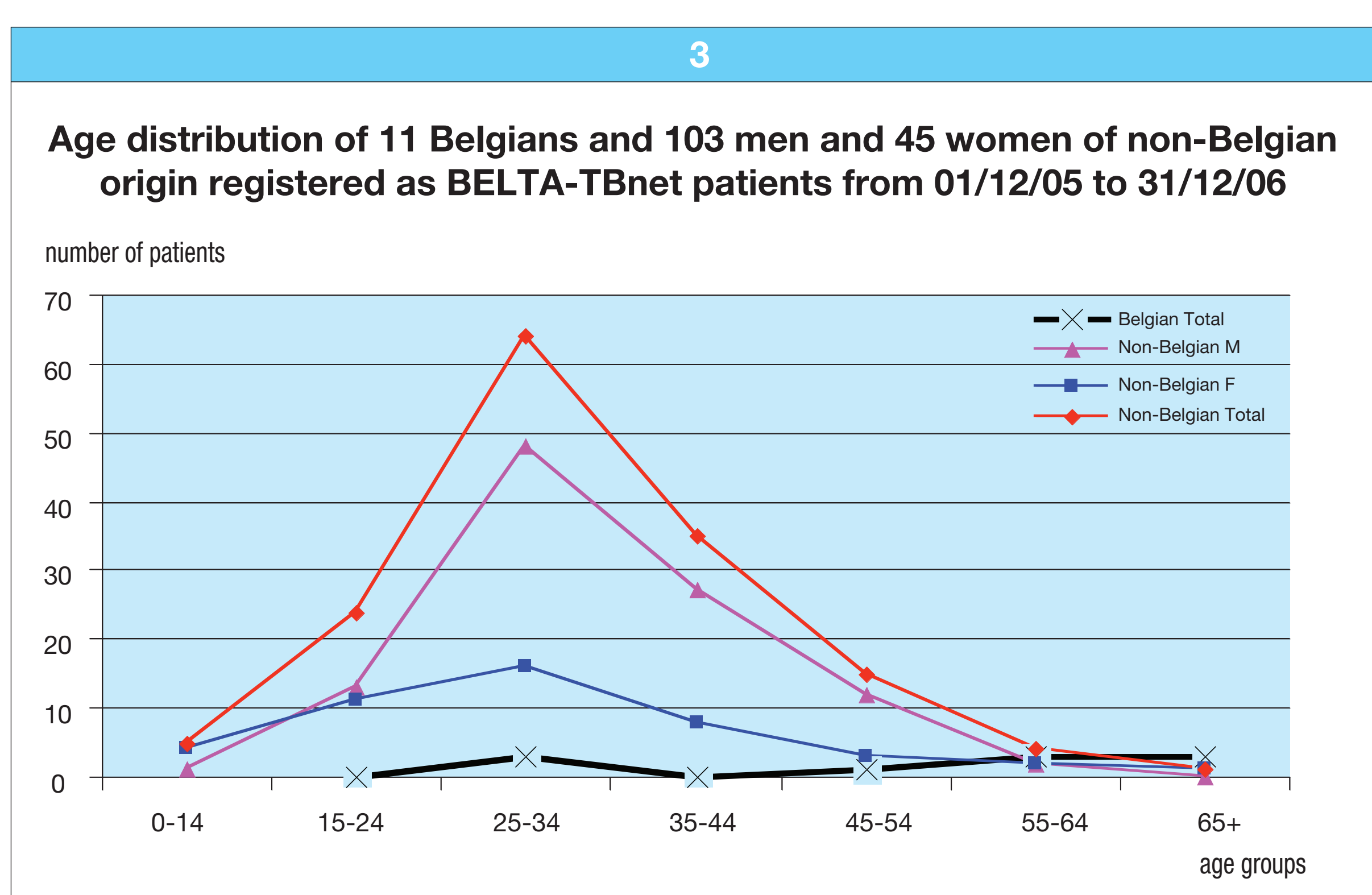
▶ The BELTA-TBnet patients came from 43 countries (see [table 2](#)). Most BELTA-TBnet patients were registered in the major urban centres: Brussels (59%), Antwerp (19%) and Charleroi (7%). 75% of the BELTA-TBnet patients had pulmonary TB.

▶ The age and sex distribution of the BELTA-TBnet patients is comparable to the general TB population in Belgium. 71% of the BELTA-TBnet patients were male. Belgian patients were considerably older (mean age 54 years) than non-Belgian patients (mean age 33 years). Among non-Belgians, the female patients (mean age 30 years) were slightly younger than the male patients (mean age 34 years): see [figure 3](#).

1		
Reason for registration of the 159 BELTA-TBnet patients registered from 01/12/05 to 31/12/06		
Social situation	number	%
Illegal immigrant	99	62%
Asylum seeker	22	14%
Administrative problems with regularisation of health insurance coverage	17	11%
Incomplete health insurance coverage	5	3%
MDR patient with health insurance coverage	14	9%
Tourist	2	1%
Total	159	

▶ All treatment is given under direct observation. [Table 4](#) shows the situation of the 159 BELTA-TBnet patients on 31 December 2006. Twenty nine among them are MDR patients. These are included in the discussion of the MDR patients in Belgium 2001-2006: see [poster 73142](#).

2			
Country of origin of 159 BELTA-TBnet patients registered from 01/12/05 to 31/12/06			
Continent	Country	Total	%
Europe	Belgium	11	7%
	Poland	8	20%
	Romania	10	
	7 other countries	13	
	Total	42	27%
Asia	China (Tibet)	7	
	Pakistan	8	
	Philippines	5	
	12 other countries	21	
	Total	41	26%
Africa	Algeria	8	
	Cameroon	6	
	Congo (Dem. Rep.)	14	
	Morocco	22	
	14 other countries	21	
Total	71	45%	
America	(2 countries)	5	3%
TOTAL		159	



4

Situation on 31/12/07 of the 159 BELTA-TBnet patients registered from 01/12/05 to 31/12/06

Situation on 31/12/06		number	%
Still on treatment and on BELTA-TBnet register		77	49%
Removed from the BELTA-TBnet register	Treatment completed	50	31%
	Health insurance coverage regularised	19	12%
	Defaulted	9	6%
	Transferred out	2	1%
	Initial MDR diagnosis not confirmed and health insurance coverage OK	2	1%
Total		159	

CONCLUSION

BELTA-TBnet has been launched successfully and is reaching its intended target:

- High enrollment rate (12% of all TB patients in 2006);
- Social security situation of 12% of BELTA-TBnet patients regularised by the TB field workers;
- Defaulter rate relatively low (6%) although most patients belong to socially marginalised groups.

Factors contributing to the success of BELTA-TBnet :

- Proper preparation
- Extensive information of all clinicians, pharmacists, social workers, hospitals and social assistance agencies;
- Clear procedures;
- Minimal paperwork for field workers;
- Good communication network

Up to 31 December 2006, an average of 3,298 Euro per patient had been spent but it is too early to calculate the exact costs.