



# STAC

## Newsletter



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**STAC Newsletter is a regular publication of SAARC TB and HIV/AIDS Centre, it includes reports on activities, decisions of important meetings of the Centre and recent information on Tuberculosis, HIV/AIDS and their control**

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## Editorial

The world has halted and begun to reverse the spread of HIV. However, only a third of women living with HIV in the world receive treatment to prevent mother to child transmission of HIV (MTCT). Even in the presence of effective treatment to prevent MTCT, still thousands of children are born with HIV and thousands of mothers die of AIDS leaving their children as AIDS orphans.

In the year 2009, an estimated 370,000 (220,000 – 520,000) children in the world became HIV during pregnancy, child birth and breast feeding period. Therefore, HIV continues to weigh heavily on child mortality particularly in Sub-Saharan Africa.

Without any intervention, the rate of passing HIV from an infected pregnant mother to her child is 30% - 40% during pregnancy and child birth. Transmission of HIV also occurs during breast feeding particularly if breast feeding is mixed with other infant food items. With the provision of existing comprehensive prevention services, the MTCT rate can be significantly reduced (<2%).

Comprehensive HIV preventive services available to reduce MTCT utilize four strategies, known as "Four Prongs Approach". The four strategies such as Primary prevention of HIV among women in child bearing age, Prevention of unwanted pregnancies among women living with HIV, Prophylactic antiretroviral treatment to mother and infant to prevent MTCT of HIV, Treatment care and support for mothers infected with HIV and for infected/affected family members

The risk of MTCT can be further reduced by implementing safe delivery practices and safe breastfeeding practices. In addition, it is necessary to ensure primary prevention of HIV among future fathers, ensure availability, acceptability, accessibility and affordability to effective family planning measures irrespective of the HIV status to prevent unwanted pregnancies, scale up access to antenatal care services including provider initiated HIV counseling and testing services and scaled up HIV prevention and treatment, care and support services for pregnant mothers and their children.

The coverage of PMTCT services with prophylactic antiretroviral treatment in SAARC Region is less than 50% according to the UNAIDS Global AIDS Report 2010. Therefore, Member States of the SAARC Region have to ensure rapid scale up of PMTCT services. The efficacy of antiretroviral drugs in preventing MTCT of HIV varies with the type of regimen used and the duration over which it is given. Combination regimens are more efficacious than monotherapies. Hence, Member States may consider to switch over from single dose Nevirapine to more effective combination regimens. The PMTCT services should be integrated into programmes addressing reproductive health in the context of maternal and child health and need to strengthen the existing maternal and child health care services. In order to achieve elimination of mother to child transmission of HIV by 2015, there is an urgent need for further capacity building and more training for health care workers particularly in HIV counseling and testing, monitoring side effects of antiretrovirals and surveillance for emerging drug resistant HIV.

As we have effective drugs to prevent MTCT of HIV, no mother should die of AIDS, no child should be born with HIV and no child should become an orphan because of HIV. If we determine to work hard we can virtually eliminate mother to child transmission of HIV to see a region having a generation free from HIV.

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# Report on Activities

## 1. Public Awareness and Advocacy Programmes on TB and HIV/AIDS

### 1.1. Commemoration of World AIDS Day (1<sup>st</sup> December)

#### Awareness Programme on HIV/AIDS & TB for School Students and Teacher

SAARC TB and HIV/AIDS Centre (STAC) commemorated the World AIDS Day 2010 with the slogan “Stop AIDS, Keep the Promise” and theme “Universal Access & Human Rights” by organizing an “Awareness Programme on HIV/AIDS and TB for School Students and Teachers” at Banepa, Kavrepalanchowk district, Nepal on 30<sup>th</sup> November 2010.

The **objective** of the programme was to enhance awareness on important aspects of HIV/AIDS and TB among school students and teachers.

Dr. Surendra Kumar Chaurasia, District Health Officer, Government of Nepal, Kavrepalanchowk district chaired the function. Mr. Sudhir Kumar Shah, Chief District Officer (CDO), Kavrepalanchowk district, Government of Nepal graced the occasion as Chief Guest.

Mr. K. B. Karki, Training Officer, SAARC TB and HIV/AIDS Centre extended welcome to the participating students and teacher on behalf of STAC.

Dr. Ganga C. Pathirana, Technical Officer (HIV/AIDS), STAC explained the importance of slogan and theme of World AIDS Day



2010 and made a presentation on “General Information & Control Strategy for HIV Infection”.

Dr. V. S. Salhotra, Deputy Director, STAC gave a presentation on “General Information on Tuberculosis & its Control”.

Dr. Surendra Kumar Chaurasia, District Health Officer, Kavrepalanchowk district presented HIV/AIDS and Control efforts in Kavre district.

Dr. Kashi Kant Jha, Director, SAARC TB and HIV/AIDS Centre delivered his presentation on “Introduction of STAC & Role of School Students and Teachers in Prevention and Control of HIV/AIDS and TB”.

Discussion session was allocated after the presentation of Director, STAC. Different questions were asked by participants about HIV/

AIDS, TB and their prevention and control in the community and role of students and teachers in these activities. The queries were answered by the experts.

Mr. Samundra Lal Shrestha, President, Nepal Red Cross Society, Kavrepalanchowk district, Mr. Bed Prasad Koju, Vice President, Nepal Anti-TB Association, Kathmandu and Mr. Mahesh Kumar Baral, Executive Officer, Banepa Municipality delivered their remarks on the occasion.

Mr. Sudhir Kumar Shah, Chief District Officer (CDO) delivered his remarks as a Chief Guest.. Mr. K. B. Basnet, Administrative Officer, STAC delivered vote of thanks.

Dr. Kashi Kant Jha, Director, SAARC TB and HIV/AIDS Centre distributed badges of AIDS Logo (Red Ribbon) to participating

students for their schools.

Dr. Surendra Kumar Chaurasia, District Health Officer, Kaverepalanchowk district delivered closing remarks in the programme.

### **Commemoration of World AIDS Day 2010 in SAARC Member States:**

The day was commemorated in SAARC Member State by organizing different activities for spreading the messages to create awareness in the community on prevention and control of HIV/AIDS.

#### **Bangladesh**

In Bangladesh a rally was organized along with other activities to commemorate the World AIDS Day 2010



(Source: www.bdnasp.net )

#### **Pakistan**

### **Celebration of World AIDS Day 2010**

In Pakistan, the National AIDS Control Programme, Ministry of Health organized a Seminar to celebrate World AIDS Day 2010 in Islamabad on 1<sup>st</sup> December

2010. The seminar was chaired by Mr. Makhdoom Shahab ud Din, Federal Minister for Health, Ministry of Health. The Seminar was attended by senior officials from government, UN system, civil society and representatives from media.

The Hon'ble Minister for Health appreciated the efforts of National AIDS Control Programme in creating awareness amongst masses on HIV & AIDS. He highlighted that Ministry of Health through the NACP is utilizing all channels and vehicles of communications for creating awareness on HIV/AIDS throughout the country for prevention and control HIV/AIDS.

Dr. Sajid Ahmad, National Programme Manager, NACP welcomed the participants to the event. He apprised the participants

that despite many efforts, the HIV infection rate has increased significantly over the past few years and the country has moved from a low prevalent situation to concentrated epidemic with HIV prevalence of more than 5% among injecting drug users (IDUs) in at least eight major cities. However, the country still has a window of opportunity as the current estimates using different prevalence estimation models indicate that the HIV prevalence among general adult population is still below 0.1%. The

commemoration of World AIDS Day and a month long campaign for awareness raising and advocacy activities throughout Pakistan is also a part of this response. Mr. Donglin Li, Country Director, ILO, Dr. Guido Sabatenelli, Country Head, WHO also addressed on the occasion.

A short play was performed as part of this mega event. The play highlighted the common ways of HIV transmission and its prevention among high risk groups and general population. An HIV positive person shared experiences of stigma and discrimination in the society to HIV positive people and how to overcome such discrimination. The Hon'ble Minister highly appreciated the support regarding care and support, including provision of free diagnosis, treatment and medicine for the HIV positive individuals throughout the country provided by the Government of Pakistan through National AIDS Control Programme.

Dr. Sajid Ahmed, the National Programme Manager, concluded the session by thanking the Chair and the all the participants. He particularly mentioned the support provided by partners for celebrating this year's World AIDS Day.

### **Advocacy Session on HIV & AIDS with Health and Education Reporters**

The National AIDS Control Programme, Pakistan launched a campaign to celebrate this year's World AIDS Day i.e. 1<sup>st</sup> December 2010. The campaign

covered diverse range of audience including youth in and out of school/universities, general public and advocacy at various levels.

In connection with the activities during this campaign, an advocacy session on HIV & AIDS with health and education reporters from both

print and electronic media was held on 29<sup>th</sup> of November 2010. (Source: www.nacp.gov.pk )

## 1.2. Celebration of SAARC Charter Day (8<sup>th</sup> December)

### Silver Jubilee Anniversary

South Asian Association for Regional Co-operation (SAARC) was established twenty five years ago when its Charter was signed by the Heads of State or Government of seven South Asian countries: Bangladesh, Bhutan, India, Maldives Nepal, Pakistan and Sri Lanka. Later, Afghanistan joined the association in 2007 as eighth member state of SAARC.

#### Interaction Programme with Students and Media People

SAARC TB and HIV/AIDS Centre (STAC) in collaboration with the SAARC Information Centre (SIC) jointly celebrated the Silver Jubilee Anniversary of the establishment of SAARC by organizing an Interaction Programme with Teachers, Students and Media People in Kathmandu on 8<sup>th</sup> December 2010.

Hon'ble Mr. Shankar Pokharel, Minister for Information and Communication, Government of Nepal graced the programme as Chief Guest.

The **Objectives** of the programme were to engage media attention on regular basis to-wards the activities of SAARC as well as to spread widely the information regarding SAARC among the high school teachers and students.

Mr. Shreedhar Gautam, Director, SAARC Information Centre (SIC)



welcomed the participants and the guests in the programme. He highlighted the functioning of the SIC along with its introduction and activities.

Dr. Kashi Kant Jha, Director, SAARC TB and HIV/AIDS Centre (STAC) welcomed the participants and guests in the programme on behalf of STAC and made a presentation on "Introduction of STAC and Situation of TB and HIV/AIDS in the Region"

Mr. Azizuddin Ahmadzada, Director, SAARC Secretariat, delivered

his remarks. He highlighted the establishment of SAARC and its establishment & functioning. He also explained the activities and progress made by the SAARC for all-round development of the people of the Region.

On behalf of the participants, a Teacher delivered his remarks. He thanked SAARC for inviting them in the programme. He also thanked for the useful information regarding TB and HIV/AIDS in the Region.

Speaking at the function Chief Guest, Hon'ble Mr. Shankar



Pokharel, Minister for Information and Communication, Government of Nepal said that “it is our duty and obligation to reaffirm our commitment to pursue more vigorously the path that we have collectively charted for all of us, as there is no alternative to the

regional cooperation in today’s integrated and competitive world”.

Hon’ble Minister concluded his remarks by paying tribute to the founding fathers of SAARC and their avid desire to see a more prosperous South Asia, and rapid progress of the association.

The function was chaired by Mr. Narayan Prasad Sharma, Chairman, Press Council, Nepal. The function was also attended by the high level officials from Government of Nepal and staff from SAARC TB and HIV/AIDS Centre, Kathmandu & from SAARC Information Centre, Kathmandu.

## 2. SAARC Meeting of the National TB & HIV/AIDS Control Programme Managers and Mechanism to tackle Cross-border Collaboration, Sri-Lanka

SAARC TB and HIV/AIDS Centre, Kathmandu organized a three day meeting of National TB & HIV/AIDS Control Programmes Managers and to discuss the Mechanisms to tackle Cross - border Collaboration from 6<sup>th</sup> to 8<sup>th</sup> July 2010. The meeting was held in Colombo, Sri Lanka

Following were the objectives of the meeting:

- To share the programme achievements, experiences and innovations made by the Member States and learn from best practices.
- To identify the regional activities of STAC according to the felt-needs of the region.
- To discuss, issues and challenges faced by the Member States in order to suggest possible solutions.
- To share the achievements and experiences of the Member



States in collaboration about TB/HIV.

The meeting was attended by the participants from Bhutan, India and Sri Lanka. Representatives from WHO/SEARO attended the meeting as observers and resource persons.

Dr. V. S. Salhotra, Deputy Director, SAARC TB and HIV/AIDS Centre, Kathmandu delivered welcome address On behalf of the Centre in opening session.

Mr. Deepak Gupta, Technical Officer, WHO/SEARO addressed the meeting and highlighted the importance of SAARC TB and HIV/AIDS Centre as a regional coordinating body and thanked the Centre for the services imparted so far.

Dr. Sunil Khaparde, Deputy Director General, National AIDS Control Organization (NACO), India highlighted the epidemiological situation of HIV/AIDS in India. He thanked SAARC TB and HIV/AIDS

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Centre for organizing the meeting on the important segment of the TB and HIV/AIDS Control Programme in SAARC Member States.

Mr. Kencho Wangdi, Assistant Programme Officer, National AIDS Control Programme, Bhutan highlighted the importance of cross-border issues in control and prevention of TB and HIV/AIDS in the region.

Dr. Sunil deAlwis, Director, National Programme of TB and Chest Diseases, Sri Lanka addressed the participants and thanked the Centre for organizing the meeting in Colombo. He expressed, although Sri Lanka has no existing geographical borders with other countries in the region, however the importance of tackling the problems emerging on HIV/AIDS and TB prevention and control in relation to the migration to Middle East countries is enormous.

The technical session was started with the self introduction of the participants. Dr. V. S. Salhotra, Deputy Director, SAARC TB and HIV/AIDS Centre, Kathmandu presented “Global and Regional Situation of TB” as well as “Initiatives taken by the Centre regarding the Cross-border issues on TB and HIV/AIDS prevention and Control”. Dr. Ganga C. Pathirana, Technical Officer (HIV/AIDS) highlighted situation of TB/HIV co-infection in the Region.

Country presentations were made by the following participants regarding TB and HIV/AIDS prevention and control and Cross-border issues.

- Mr. Kencho Wangdi, Assistant Programme Officer, National HIV/AIDS Control Programme, Bhutan.

- Mr. T. Dendup, Assistant Programme Officer National TB Control Programme, Bhutan.

- Dr. Sunil Khaparde, Deputy Director General, NACO Ministry of Health and Family Welfare, India

- Dr. (Mrs.) GWK Jayakody, Medical Officer, (Training) National TB Control Programme on behalf of Dr. A. K. S. B. Alwis Programme Manager, National TB Control Programme, Sri Lanka

After country presentations interactive discussion among participants and resource persons from the Centre and WHO/SEARO on the issues was held.

Programme concluded with the different important recommendations related with cross-border issues in TB and HIV/AIDS prevention and control.

### **3. SAARC Regional Training on Leadership and Strategic Management for National/District level TB and HIV/AIDS Prevention and Control Programme Managers, Maldives**

SAARC TB and HIV/AIDS Centre (STAC), Kathmandu, organized a five-day training programme on “**SAARC Regional Training on Leadership and Strategic Management for National/District level TB and HIV/AIDS Prevention and Control Programme Managers**” in Male, Maldives. The programme was held with the coordination of National Tuberculosis Control Programme



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and National HIV/AIDS Control Programme of Maldives from 2<sup>nd</sup> to 6<sup>th</sup> August 2010 in Male.

The **objectives** of the programme were to enhance the existing understanding, knowledge & skills on leadership & strategic management among National/ District level Programme Managers of National TB & HIV/AIDS Control Programmes to scale-up and strengthening the TB & HIV/AIDS prevention & control activities in Maldives.

Twenty-four participants nominated by Government of Maldives attended the training. They were from National TB Control Programme and from National HIV/AIDS Control Programme, Maldives.

Mr. Ibrahim Shaheem, Former Director General, Centre for Community Health and Disease Control, Ministry of Health and Family, Government of Republic of Maldives graced the programme as the Chief Guest for the opening session.

Dr. Ahamed Jamsheed Mohamed, Director General, Centre for Community Health and Disease Control, Ministry of Health and Family, Government of Republic of Maldives attended the inaugural session of the programme.

Mr. Abdul Hasan Hameed, Senior Programme Officer for TB and HIV/AIDS Control Programme, Ministry

of Health and family, Government of Republic of Maldives attended the inaugural session of the programme.

Dr. Ganga C. Pathirana, Technical Officer (HIV/AIDS), SAARC TB and HIV/AIDS Centre, Kathmandu, Nepal welcomed the Chief Guest on behalf of Director, SAARC TB and HIV/AIDS Centre.

Dr. Ahamed Jamsheed Mohamed, delivered the welcome address. In his address, he highlighted the burden of TB and HIV/AIDS in Maldives and emphasized the importance of leadership and managerial skills training for National and Regional level Programme Manager in order to contain the dual epidemics successfully. He thanked SAARC TB and HIV/AIDS Centre for organizing this training programme in Maldives for the Programme Managers. He also thanked the Resource Persons from IIHMR for their endeavor to make the training interesting and successful.

Dr. S. D. Gupta, Director, Indian Institute of Health Management Research (IIHMR), India delivered opening remarks and expresses his wish for a successful accomplishment of objectives of the training programme.

Dr. Ganga C. Pathirana, Technical Officer (HIV/AIDS) delivered remarks on behalf of SAARC TB and HIV/AIDS Centre. She read out the remarks sent by Dr. Kashi

Kant Jha, Director, SAARC TB and HIV/AIDS Centre for the successful completion of the programme and expressed good wishes to the participants and resource persons.

Chief Guest of the Programme Mr. Ibrahim Shaheem, former Director General, Centre for Community Health and Disease Control, Ministry of Health and Family, Government of Republic of Maldives delivered his address. He stated the global burden of the TB and HIV/AIDS in Maldives. He emphasized that this is an opportunity for Maldives to train team of Programme Managers with full of leadership and managerial skills to successfully launch the control activities planned. He thanked Dr. Kashi Kant Jha, Director, STAC and his team for continuing support extended to SAARC Region including Maldives in capacity building of Health Care Workers. Ms. M. K. Dhakal, SPA delivered Vote of Thanks.

Technical Session was started by Resource Persons Dr. S. D. Gupta and Dr. Nutan Prabha Jain from IIHMR, India along with other facilitators Mr. B. N. Gyawali, Senior Coordinator, National TB Control Programme, Nepal & Dr. Ganga C. Pathirana, STAC.

The Closing Session of the programme was organized in the presence of Mr. Abdul Hameed Hasan, Programme Manager, National TB Control Programme



and National AIDS Control Programme.

### Outcome

The participants updated their knowledge on managerial styles,

leadership and leadership styles, personal effectiveness, role, efficacy interpersonal communications, team building and building partnership. The training equipped Programme Managers with improved

managerial skills and leadership qualities to achieve the time bound pledges, universal access to HIV prevention, treatment, care and support by 2010 and scale-up the control activities further more.

## 4. SAARC Regional Training on Leadership and Strategic Management for National/District level TB and HIV/AIDS Prevention and Control Programme Managers in Bhutan

SAARC TB and HIV/AIDS Centre (STAC), Kathmandu, organized a five-day training programme on “SAARC Regional Training on Leadership and Strategic Management for National/District level TB and HIV/AIDS Prevention and Control Programme Managers” in Thimphu, Bhutan. The programme was held with the coordination of National Tuberculosis Control Programme and National HIV/AIDS Control Programme of Royal Government of Bhutan in Thimphu from 23<sup>rd</sup> to 27<sup>th</sup> August 2010.

The **objectives** of the programme were to enhance the existing understanding, knowledge & skills on leadership & strategic management among National/District level Programme Managers of National TB & HIV/AIDS Control Programmes for scaling-up and strengthening the TB & HIV/AIDS prevention & control activities in Bhutan.

Twenty-three participants from National TB Control Programme



and National HIV/AIDS Control Programme were nominated by Royal Government of Bhutan for the training.

Dr. Ugyen Dophu, Director, Department of Public Health, Ministry of Health, Royal Government of Bhutan, graced the programme as the Chief Guest of the opening ceremony. Dr. Kashi Kant Jha, Director, SAARC TB and HIV/AIDS Centre and Director NTP, Nepal welcomed Dr. Dophu and other dignitaries in the programme.

Mr. Tandin Dorji, Chief Programme Officer, Communicable Diseases

Division, Ministry of Health the Royal Government of Bhutan delivered the welcome address. He emphasized the burden of TB and HIV/AIDS in Bhutan and stressed the importance of leadership and managerial skills training for National and Regional level Programme Managers in order to contain the dual epidemics successfully. He praised the Director, STAC for organizing this training programme in Bhutan and warmly welcomed the STAC officials and the Resource Persons from IIMR, India. He concluded his speech by wishing for a

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successful completion of training programme.

Dr. S. D. Gupta, Director, Indian Institute of Health Management Research (IIHMR), India and Resource Person of the training programme delivered opening remarks.

Dr. Ugyen Dophu, Director, Department of Public Health, Ministry of Health, the Royal Government of Bhutan, addressed the gathering and stated the global burden of the TB and HIV/AIDS. He pointed out that Bhutan has to improve the quality of TB and HIV/AIDS control in district level in Bhutan. He offered his deep appreciations to Dr. Kashi Kant Jha, Director, SAARC TB and HIV/AIDS Centre, Nepal and his team for continuing support extended to SAARC Region including Bhutan.

Dr. Kashi Kant Jha, Director, SAARC TB and HIV/AIDS Centre, Kathmandu, delivered his remarks by thanking the Department of Public Health, Royal Government of Bhutan and both National TB and HIV/AIDS Control Programmes for

providing concurrence to organize the training in Thimphu. He thanked the Resource Persons for participation in this programme. He adjourned his remarks by wishing for a successful training programme and a pleasant stay of participants, Resource Persons and officials in Thimphu. Dr. Jha extended good wishes for successful completion of the programme.

Dr. V. S. Salhotra, Deputy Director, SAARC TB and HIV/AIDS Centre, Kathmandu delivered vote of thanks.

The training programme was concluded with the gracious presence of Hon'ble Dr. Gado Tshering, Officiating Minister, Ministry of Health, Royal Government of Bhutan as the Chief Guest. Dr. Tshering thanked Dr. S. D. Gupta, Director, and Dr. Nutan Jain, Associate Professor, IIHMR, Jaipur, India for their role and contribution as Resource Persons and he also thanked Dr. Kashi Kant Jha, Director, SAARC TB and HIV/AIDS Centre and his team for their hard work to make the programme successful.

Dr. Nado Dupka, Officiating Director, Department of Public Health, Bhutan, Mr. Tandin Dorji, Chief Programm Officer, Communicable Diseases Division, Ministry of Health, Bhutan were also present in the programme.

Honorable Dr. Tshering distributed the certificates to participants. Dr. Ganga C. Pathirana, Technical Officer (HIV/AIDS), SAARC TB and HIV/AIDS Centre delivered the vote of thanks.

### **Outcome**

The participants updated their knowledge on managerial styles, leadership and leadership styles, personal effectiveness, role, efficacy interpersonal communications, team building and building partnership. The training equipped Programme Managers with improved managerial skills and leadership qualities to achieve the time bound pledges, universal access to HIV prevention, treatment, care and support by 2010 and scale-up the control activities further more.

## 5. Visit of SAARC Goodwill Ambassador for HIV/AIDS Ms. Shabana Azmi to Thimphu, Bhutan,

On the invitation of SAARC Secretariat and SAARC TB and HIV/AIDS Centre, Ms. Shabana Azmi, SAARC Goodwill Ambassador for HIV/AIDS visited Thimphu, Bhutan from 25<sup>th</sup>- 26<sup>th</sup> August, 2010. Dr. Ugen Dopu, Director, DoPH, Ministry of Health, Royal Government of Bhutan, Dr. Kashi Kant Jha, Director, SAARC Tuberculosis and HIV/AIDS Centre (STAC), Kathmandu and other representatives from Department of Public Health, Ministry of Foreign Affairs, SAARC TB and HIV/AIDS Centre and Indian Embassy, welcomed her at the Paro Airport.

Consequently, a Sensitization meeting was jointly organized by the Department of Public Health, Ministry of Health, Royal Government of Bhutan and SAARC TB & HIV/AIDS Centre for the SAARC Goodwill Ambassador for HIV/AIDS at Hotel Taj Tashi, Thimphu, Bhutan.

The overall objective of the meeting was to sensitize SAARC Goodwill Ambassador for HIV/AIDS for the need of strengthening of National and regional response to HIV/AIDS and to appraise her on the situation of TB & HIV/AIDS in Bhutan.

In the sensitization meeting, Dr. Ugen Dopu on behalf of Ministry of Health, Royal Government of Bhutan, extended a warm welcome to Ms. Shabana Azmi,



SAARC Goodwill Ambassador for HIV/AIDS. Dr. Kashi Kant Jha, Director, STAC also welcomed her and described the Global and Regional (SAARC) situation of TB & HIV/AIDS in the SAARC region. Dr. V.S. Salhotra, Deputy Director, STAC made a presentation about **“SAARC TB and HIV/AIDS Centre (STAC) & Regional issues and challenges in relation to HIV/AIDS and Tuberculosis”**. Mr. Sonam Wangdi, Programme Officer, HIV/AIDS, Ministry of Health, Royal Government of Bhutan made a presentation on **“Situation of HIV/AIDS in Bhutan”** and Mr. Chewang Rinzin, Sr. Programme Officer, Tuberculosis, Ministry of Health, Royal Government of Bhutan made a presentation on **“Situation of Tuberculosis in Bhutan”**.

Many issues on Tuberculosis and HIV/AIDS were discussed in detail. Ms. Shabana Azmi mainly focused on the situation of TB &

HIV/AIDS in Bhutan and about available services for control HIV/AIDS and TB. She desired to know about the Public Health services, participation of civil society and response of the Government on TB & HIV/AIDS. She praised the Government effort on the two diseases in spite of low numbers of estimated HIV infected.

Ms. Shabana Azmi, SAARC Goodwill Ambassador for HIV/AIDS made a courtesy call on the Honorable officiating Minister and Secretary (Health), Dr. Gado Tshering and Dr. Dorji Wangchuk, Director General, Department of Medical Services, Ministry of Health. She also made a courtesy call on Mr. Daw Penjo, Honorable Secretary, Ministry of Foreign Affairs, Royal Government of Bhutan, She had discussions on various issues on HIV/AIDS, Tuberculosis, health, gender inequality and SAARC regional





mechanisms strengthening with officials of Foreign & Health Ministries of Royal Government of Bhutan. Honorable Officiating Minister and Secretary (Health) Dr. Gado Tshering suggested to STAC to take steps for developing linkages between Voluntary Counseling and Testing Centres (VCTs) of India and Bhutan in the border sharing districts for prevention of HIV infection due to mushrooming of Commercial Sex Workers at the borders.

Ms. Shabana Azmi during her visit made a call on Honorable Prime Minister, Royal Government of Bhutan, Mr. Lyonchen Jigmi Y. Thinley, in his office. Ms. Shabana Azmi expressed her happiness to Honorable Prime Minister on the fact that the State is taking responsibility of the health needs of all the citizens irrespective of their social class. She also said that it is very heartening to see the passion and care with which Health staff of Bhutan dedicates themselves to the health of the people of the country. She also expressed her heartiest

congratulations to the Honorable, Prime Minister for launching the unique Gross National Happiness Index. Honorable Prime Minister congratulated her on taking up the responsibility of SAARC Goodwill Ambassador for HIV/ AIDS and expressed his happiness on the fact that the SAARC Goodwill Ambassador is a female. Honorable, Prime Minister and Ms. Shabana Azmi had detailed discussion on the issues and challenges for HIV/ AIDS. Honorable Prime Minister suggested her to have a meeting with Motion Pictures Association to motivate them to prepare features containing socially relevant messages.

### **Participation in Leadership & Strategic Management Training**

Ms. Azmi was briefed about the ongoing Leadership & Strategic Management Training organized by STAC and Ministry of Health, Royal Government of Bhutan. She expressed her desired to meet the participants. She visited the training venue and was introduced

to the participants and Resource Persons from Indian Institute of Health Management Research (IIHMR). The participants and the Resource Persons also gave an introduction of themselves to Ms. Azmi, SAARC Goodwill Ambassador for HIV/AIDS. She addressed the participants and told them about the virtues of leadership, management and good communication skills for delivering effective healthcare.

Ms. Azmi visited Gidakom Hospital where she observed the general healthcare services and Tuberculosis health services being provided in the hospital and also met and interacted with a few admitted patients and officials working in the hospital.

Ms. Shabana Azmi held a Press Conference with journalists from print and mass media. During the Press Conference, she stressed on the need for shedding hesitation and reluctance to come forward for HIV infected and utilization of services by them, need for taking care of the local sensitivities, need for robust sex education in schools and removal of stigma and discrimination for HIV infected. She appealed through media for all the women of Bhutan to come forward to access health and HIV/AIDS prevention, treatment, care and support services being provided free of cost by Government of Bhutan. After, her address to media, she interacted with the journalists and answered their questions.

She also met with representatives from the film industry in Bhutan, the President & Vice-President of Motion Pictures Association, producers, directors and actors. She applauded Miss Bhutan's efforts of social sensitization through the medium of films and

re-iterated to all that Art should be used as an instrument for social change. She got a wide coverage in the print and mass media of Bhutan for her visit.

Her Majesty the Queen Mother Ashi Sangay Choden Wangchuck gave a private audience to Ms. Shabana

Azmi and her companion Ms. Tanvi Azmi at the Ministers Enclave, Motithang. Her Majesty, the Queen Mother also took Ms. Azmi for a private tour of the Textile Museum and hosted a dinner in honor of Ms. Shabana Azmi, SAARC Goodwill Ambassador for HIV/AIDS.

## 6. Twentieth Meeting of Governing Board of SAARC Tuberculosis and HIV/AIDS Centre

The Twentieth Meeting of the Governing Board of STAC was held in Kathmandu from 23<sup>rd</sup> to 24<sup>th</sup> September, 2010. Dr. Kashi Kant Jha, Director, SAARC TB and extended warm welcome to all the Board Members in the Meeting. Dr. B. B. Rewari, National Programme Officer (ART), National AIDS Control Organization, India, in his capacity as outgoing Chairperson of the Governing Board of STAC opened the Meeting. He expressed his appreciation to the Member States for their support extended to STAC during his Chairmanship for conducting Centre's activities. Mr. Hassan Shifau, Director, SAARC Secretariat gave his remarks at the opening of the Meeting.

The meeting was attended by the Members of the Governing Board from Bangladesh, Bhutan, India, Nepal Sri-Lanka and Representatives of Secretary-General of SAARC and Ministry of Foreign Affairs, Government of Nepal.



**Mr. Shafiqul Islam Laskar**, Joint Secretary, Ministry of Health & Family Welfare, Government of Bangladesh, Dhaka, Bangladesh, **Dr. Ugen Dophu**, Director, Department of Public Health, Ministry of Health, Government of Bhutan, Thimphu, Bhutan, **Dr. B. B. Rewari**, National Programme Officer (ART), National AIDS Control Organisation (NACO), New Delhi, India, **Dr. Senendra Raj Upreti**, Chief of Curative Services, Ministry of Health and Population, Government of Nepal,

Kathmandu, Nepal, **Mr. Tapas Adhikari**, Under Secretary, Ministry of Foreign Affairs, Government of Nepal, Kathmandu, Nepal, **Ms. Indira Gohiwar Aryal**, Section Officer, Ministry of Foreign Affairs, Government of Nepal, Kathmandu, Nepal, **Dr. A.K. S. B. De Alwis**, Director, National Programme for TB Control and Chest Diseases, Government of Sri Lanka, Colombo, Sri-Lanka, **Mr. Hassan Shifau**, Director (Social Affairs Division), SAARC Secretariat, Kathmandu, and **Dr. Kashi Kant Jha**, Director, SAARC TB and HIV/

AIDS Centre, Kathmandu attended the meeting.

Mr. Tapas Adhikari, Governing Board Member from Nepal was selected as Chairman of the Governing Board of SAARC TB

and HIV/AIDS Centre. All members of the Board congratulated him on selection as Chairman of the Board.

The Board discussed programme activities and budget (Institutional

and Programme Cost) for the year 2011 submitted by the SAARC TB and HIV/AIDS Centre and recommended for the approval of Programming and Standing Committee.

## 7. SAARC Regional Workshop for Development of Regionally Relevant Research Protocol on TB & HIV/AIDS for SAARC Member States, Jaipur, India

SAARC TB and HIV/AIDS Centre, Kathmandu, Nepal, Government of India and Indian Institute of Health Management Research (IIHMR), Jaipur, India jointly organized SAARC Regional Workshop for Development of Regionally Relevant Research Protocol on TB & HIV/AIDS for SAARC Member States. The programme was held in Jaipur, India from 20<sup>th</sup> to 24<sup>th</sup> Dec. 2010.

The objectives of the programme were:

- To enhance the capacity of programme managers of TB & HIV/AIDS Control Programmes and relevant staff of Member States to identify priority research areas, development of research protocols and their implementation.
- To promote utilization of research results at all decision making levels of both TB and HIV/AIDS Programmes in SAARC Member States



- To identify the priority areas of research on TB, HIV/AIDS and TB/HIV Co-infection
- To develop Research Protocol on identified areas of research on TB, HIV/AIDS and TB/HIV Co-infection.

The programme was inaugurated on 20<sup>th</sup> December 2010 in the presence of Dr. M. L. Jain, Director, Reproductive Child Health, State Government of Rajasthan as Chief Guest, Dr. S. D. Gupta, Director, Director, IIHMR, Dr. P. R. Sodani, Dean, IIHMR, Dr. Kashi Kant Jha, Director, SAARC TB and HIV/

AIDS Centre, Nepal and Dr. V. S. Salhotra, Deputy Director, SAARC TB and HIV/AIDS Centre, Nepal.

Dr. S. D. Gupta, Director, IIHMR delivered welcome speech by appreciating STAC for organizing this important workshop in Jaipur. He described the role of IIHMR in Health Research Management in India.

Dr. M. L. Jain, Director, Reproductive child health, State Government of Rajasthan explained the situation of TB and HIV/AIDS in Rajasthan State. He expressed the



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importance of conducting relevant research studies in order to improve the quality of the services. He concluded his remarks by thanking the IIHMR and STAC officials and wished for successful accomplishment of the objectives of the workshop.

Dr. Anoop Khanna, Associate Professor, IIHMR, Jaipur convened the opening ceremony as the Master of Ceremony.

Dr. S. D. Gupta, Director, IIHMR, Jaipur welcomed the participants and dignitaries in the meeting. In his address Dr. Gupta congratulated the Director, STAC for organizing this workshop in Jaipur and expressed his good wishes for successful of the programme.

Dr. Kashi Kant Jha, Director, STAC delivered key note address. He thanked IIHMR for giving consent to organize this workshop in Jaipur, India. He explained about problem of TB and HIV/AIDS in

SAARC Region and emphasized the role of STAC in prevention and control of TB & HIV/AIDS in the Region. Dr. Jha stressed the role of Operational Research in the control programme.

Dr. V. S. Salhotra, Deputy Director, STAC delivered Vote of Thanks in the session.

On the last day, the two groups of participants had completed 10 Research Protocols and presented the final protocols developed by each group. Dr. Upasana Agrawal, Medical Officer, LRS Institute, New Delhi and Dr. Sriyakanthi Beneregama from Sri Lanka made the presentations of the two groups.

In the Closing Ceremony Dr. L. P. Singh, Dean (Research), IIHMR, India delivered the key note address as Chief Guest. He stressed the importance of Operational Research studies and thanked

STAC and IIHMR for organizing this important workshop.

Dr. P. Kumar, Director, NTI, Bangalore, India delivered his remarks on behalf of participants.

Prof. Dr. Nilambar Jha addressed the workshop on behalf of Resource Persons.

Dr. Kashi Kant Jha, Director, STAC delivered Closing Remarks and thanked NTP, Government of India and IIHMR for giving consent to organize this programme in Jaipur, India. Dr. Jha thanked all participants, resource persons and guests for their remarkable contribution for the success of the workshop.

Dr. Kashi Kant Jha, Director, STAC and Dr. L. P. Singh, Dean, IIHMR, awarded certificates to participants and resource persons.

Dr. Anoop Khanna, Associate Professor, IIHMR delivered Vote of Thanks.

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## Brief News

### Farewell to staff

Dr. Ganga C. Pathirana, Technical Officer (HIV/AIDS), SAARC TB and HIV/AIDS Centre returned to her home country after partial completion of her tenure as Professional staff in the Centre on 31<sup>st</sup> Dec. 2010. The Centre thanked and appreciated her contributions during her tenure.

Mr. Jhabindra Prasad Ghimire, Medical Technologist, SAARC TB and HIV/AIDS Centre resigned from his service from the Centre from July 1<sup>st</sup> 2010. The Centre thanked him for his service and contributions.

### Welcome News

Staff of the SAARC TB and HIV/

AIDS Centre welcomed the following dignitaries to the Centre:

- Mr. Kazuyuki Uji and Ms. Nashida Sattar from UNDP visited SAARC TB and HIV/AIDS Centre on 7<sup>th</sup> Sept. 2010 and observed the functioning of the Centre and express their happiness regarding the



progress and presentation of the Centre

- Ms. Geeta Sethi, APLF Manager, Regional Support Team, UNAIDS, Bangkok,

Government of Bhutan and Ms. Roshan Khanal, Central Pass Port Office and Ms. Indira Gohiwar Aryal, SAARC Section, Ministry of Foreign Affairs, Government of Nepal



Thailand visited the SAARC TB and HIV/AIDS Centre on 21<sup>st</sup> Sept. 2010 and discussed the Regional situation of HIV/AIDS in the SAARC Region.

- A team consisting Mr. Ugen Dorji and Mr. Tenzin Dorji from Department of SAARC & Regional Organizations, Ministry of Foreign Affairs, Royal



visited SAARC Tuberculosis and HIV/AIDS Centre on 18<sup>th</sup> October 2010 and observed the functioning of the Centre and discussed about the situation of TB and HIV/AIDS in the SAARC Region .

- A team consisting Ms. Sayeda Jesmin Sultana Milky, Assistant Secretary, Ministry of Foreign Affairs, Government of Bangladesh, Mr. Md. Reyad Hossain, Assistant Secretary, Ministry of Foreign Affairs, Government of Bangladesh and Mr. Christy Ruban, Assistant Director, Ministry of Foreign Affairs, Government of Sri Lanka visited SAARC TB and HIV/AIDS Centre on 23 Dec. 2010. A brief introduction of the Centre was given through PowerPoint presentation. The team observed the functioning of the Centre and expressed their satisfaction towards the progress and achievement of the Centre.

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# Participation in International Conferences/Meetings/Workshops

## 1. XVIII International AIDS Conference (AIDS 2010), Austria

Dr. Kashi Kant Jha, Director, STAC participated in XVIII International AIDS Conference (AIDS 2010) organized by International AIDS Society (IAS) held in Vienna, Austria from 18<sup>th</sup> to 23<sup>rd</sup> July 2010. Following posters were presented from SAARC TB and HIV/AIDS Centre in the Conference:

- HIV Prevalence Among Diagnosed TB Patients in Bangladesh
- HIV Related Knowledge Among Women in Nepal
- Epidemiology of TB/HIV Co-infection in SAARC Region and Regional Efforts to Contain it

## 2. Meeting of SEAR Technical Working Group on TB

Dr. V. S. Salhotra, Deputy Director, STAC participated in Meeting of SEAR Technical Working Group on TB

held in New Delhi, India organized by WHO/SEARO from 22<sup>nd</sup> to 23<sup>rd</sup> April 2010.

## 3. Regional Workshop on ACSM for TB control:

Dr. Kashi Kant Jha, Director, STAC participated in Regional Workshop on Advocacy, Communication and Social Mobilization (ACSM) for TB Control, organized by WHO/SEARO held in Colombo Sri Lanka from 14 to 17 September 2010.

## 4. 41<sup>st</sup> IUATLD Conference:

Dr. Kashi Kant Jha, Director, STAC participated in 41<sup>st</sup> Union World Conference on Lung Health held from 11<sup>th</sup> to 15<sup>th</sup> November 2010 in Berlin, Germany. In the Conference following two posters were presented :

- Barriers to directly observed treatment for MDR TB Patients in Nepal: A Qualitative Study
- Trends of TB-HIV Co-infection in Nepal.

## A Tribute to Mrs. Rama Maharjan

We express profound grief at the sad demise of Mrs. Rama Maharjan, a General Services Staff of SAARC TB & HIV/AIDS Centre. She passed away on Oct. 3, 2010. She had been working in the Centre since 1994. All the staff members of STAC convey their heartfelt condolence to the bereaved family and pray for eternal peace of departed soul.





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## Special Article and Technical Information

### Congenital Syphilis and Elimination of Congenital Syphilis

**Dr. Ganga C. Pathirana**

MBBS, DCH, MSc (Com. Med.), MD (Com. Med.), Dip GUM (Lon), DFFP (RCOG-UK)  
Technical Officer ( HIV/AIDS), SAARC TB & HIV/AIDS Centre, Nepal

#### Congenital Syphilis

Syphilis is a sexually transmitted infection caused by a bacterium known as *Treponema pallidum*. This infection can be transmitted from infected pregnant mother to her baby during pregnancy or during child birth. During pregnancy, the transmission usually occurs through placenta. Transmission during pregnancy can occur at any time. However, transmission can usually take place between 16 – 28 weeks of pregnancy<sup>1</sup>. Transmission is higher from a mother with early syphilis (first two years following acquisition of infection) than with late syphilis. Congenital syphilis is an infectious, disabling and often a life threatening infection.

Adverse outcomes of mother to child transmission of syphilis are spontaneous abortion, stillbirth, low birth weight babies, perinatal death, neonate with congenital infection. Congenital syphilis may be asymptomatic at birth as well as first few weeks of life approximately in 50% of cases. Clinical manifestations may usually appear in the first few months of life. However, it can be delayed up to the second year of life.

The most frequent clinical signs of congenital syphilis at birth are

hepato-splenomegaly, radiological changes in the long bones, bullous skin rash, fever, low birth weight, nasal snuffles, bleeding, swelling of the joints, pseudoparalysis, abnormal facies, abdominal distension, pallor, jaundice and respiratory distress. They are not specific signs of congenital syphilis and can occur with other congenital conditions as well.

#### Manifestations of Congenital Syphilis

- Hutchinson's Triad (nerve deafness, Hutchinson's teeth and interstitial keratitis)
- Mulberry molars
- Frontal bossing
- Poorly developed maxillae
- Hepatomegaly
- Splenomegaly
- Skin rashes including petechiae
- Anaemia
- Jaundice
- Enlarged lymph nodes
- Pseudo paralysis
- Saddle nose deformity
- Nasal snuffle
- Rhagades
- Abnormal radiological findings

Commonly available serological tests are based on the detection of the immunoglobulin G (IgG) which presents in the baby may have been transferred from maternal antibodies. Therefore, it is not easy to diagnose congenital syphilis in all suspected cases. As maternal IgM antibodies does not cross the placenta, IgM based antibody tests carried out on serum of neonate are appropriate to diagnose congenital syphilis. Treponemal IgM antibodies can be detected in more than 80% of symptomatic infants. Unfortunately, these tests are expensive and not available in most developing countries.

#### Elimination of Congenital Syphilis

The annual incidence of syphilis in the world is 12 million. Of that 2 million occur among pregnant mothers<sup>1</sup>. Early syphilis in a pregnant mother can give rise adverse outcomes of pregnancy in about 80% of such cases ranging from spontaneous abortion to death in utero, perinatal death, congenital infection leading to disability. The annual global incidence of congenital syphilis is estimated to be between 0.71 to 1.57 million<sup>2</sup>. However, syphilis has not received much attention mainly due to lack of awareness

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of the burden and consequences of congenital as well as adult syphilitic infection. By recognizing the importance of elimination of the congenital syphilis from the world, WHO launched an initiative for Global Elimination of Congenital Syphilis in 2007. This initiative will contribute to achieve Millennium Development Goals in relation to maternal and child health and HIV/AIDS (MDG 4 – reduce child mortality, MDG 5 – improve maternal health and MDG 6 – combat HIV/AIDS, Malaria and other diseases).

In order to eliminate congenital syphilis from countries and regions, it is highly appropriate to raise awareness on burden of syphilis in the community and in the health sector particularly at the primary health care levels which is the point of care for most of the pregnant mothers. To achieve the success, this activity needs support of the political leadership, high level commitment and awareness on consequences of syphilis and the availability of services among pregnant mothers. Elimination of congenital syphilis is made easier by declaration and provision of following services for pregnant mothers;

1. Universal access for ante-natal care (ANC)
2. Universal screening of pregnant mothers for syphilis during first ANC visit and preferably during third trimester also (cheap and simple screening tests are available).
3. Treating all positive pregnant mothers and their sexual

partners (cheap and effective antibiotic known as penicillin is available)

4. Treating all neonates born to sero-positive pregnant mothers

Screening of syphilis can be combined with that of HIV/AIDS to complement each other by reducing the cost, manpower, time involved. In addition, activities dealing with elimination of congenital syphilis should be integrated appropriately with the existing services.

WHO-SEARO has targeted to eliminate congenital syphilis from the region by 2020 with the coordination and collaboration with Member States. Elimination is said to be achieved when the incidence of congenital syphilis falls below 0.5 per 1000 live births. Of the Member States of the SAARC Region, India and Sri-Lanka have already initiated the elimination programme in 2009. Bangladesh, Maldives and Nepal have planned to initiate its programme in 2010 and Bhutan will launch the programme in 2011. Sri-Lanka targets to eliminate congenital syphilis by 2015, Bangladesh, Bhutan, India, Maldives and Nepal by 2020<sup>1</sup>.

The elimination of congenital syphilis programmes should be based on the right based approach and make sure to inform people on basic information on syphilis, the ways to protect themselves from this infection and where to seek services. In order to improve the health seeking behaviour, the service providers should take utmost care in maintaining the confidentiality of the test results

and other information obtained from the care seekers. To achieve the success in elimination of congenital syphilis, the programme needs to involve all the important stakeholders such as government organizations (health, education, labour, women affairs, social services), NGOs, INGOs and multilateral organizations dedicated to prevention and control of HIV/AIDS. In addition, health sector has to train health care workers to identify the infants and children affected with congenital syphilis and manage them appropriately. As all the countries in the region are targeting to eliminate congenital syphilis, it is essential to establish urgently an appropriate mechanism to confirm the clinical diagnosis and recording and reporting system as one of the essential items of the continuous surveillance.

The probability of occurrence of congenital syphilis will be high till we curb the syphilis among adult men and women. Hence, great care should be taken to prevent and control of syphilis among adults particularly among future mothers and fathers.

## References

1. WHO-SEARO. *Regional Strategy for the elimination of congenital syphilis, 2009*
2. WHO. *Action for the global elimination of congenital syphilis: rationale and strategy. Geneva, WHO Department of Reproductive Health and Research, 2005.*
3. WHO-SEARO. *Elimination of congenital syphilis. Fact Sheet issued on World AIDS Day, 1<sup>st</sup> December 2008*

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