



Dear <<First Name>>,

Welcome to the April edition of the TB Modelling and Analysis Consortium ([TB MAC](#)) newsletter, with information for TB modellers, epidemiologists, and decision makers.

Global Health Cost Consortium

The GHCC has been launched and aims to systematically improve the quality, timing, local relevance, interpretation, and use of cost information on HIV/AIDS, and TB. The consortium will extract, collate and analyse existing cost data sets in order to provide accessible cost estimates of HIV and TB services; identify data gaps; and produce standards, guidance and methods for high quality and efficient cost data collection. It is a partnership with the University of Washington, UCSF, Avenir Health, Mexico's National Institute of Public Health, the London School of Hygiene and Tropical Medicine, and the University of Cape Town.

Some interesting papers surrounding [World TB Day](#) have been published recently :

- [The timing of Tuberculosis](#) after isoniazid preventive therapy among gold miners in South Africa, by Hermens et al, suggests that reactivation of persistent latent infection played a role in the rapid return to baseline TB incidence in this setting
- [Potential impact](#) of spatially targeted adult tuberculosis vaccine in Gujarat, India', by Shrestha et al suggests that identifying high-incidence hotspots and quantifying spatial mixing patterns are important for accurate estimation of the value of targeted intervention strategies
- Oxlade et al presented a paper on [Xpert MTB / RIF](#) for the diagnosis of Tuberculosis in a remote arctic setting, and suggest that adding Xpert® to the current diagnostic algorithm for TB in Nunavut reduces time to diagnosis and treatment at reasonable cost
- Marino et al suggest that [computational and empirical studies](#) predict *mycobacterium tuberculosis*-specific T cells as a biomarker for infection outcome
- Zwerling et al present a [simplified cost-effectiveness model](#) to guide decision making for shortened anti-tuberculosis treatment regimens
- Pinto et al present a model on the cost-effectiveness of the [Xpert MTB/RIF assay](#) for tuberculosis diagnosis in Brazil
- Sumner et al's new [modelling paper](#) suggests that among HIV-infected individuals on ART in low incidence settings, 12 months of IPT may provide additional long term benefit, whilst among HIV-infected individuals on ART in high incidence settings continuous preventive therapy together with improved infection control efforts will be required to provide long-term protection against TB.
- Houben et al present the [TIME Impact](#) paper which describes the model and a framework for using the model in the policy process.

If you would like us to highlight your TB modelling paper in our future newsletters,

please [email](#) us.

Job Opportunity

A job opportunity at the Institute for Disease Modeling (IDM) in Washington is available: Research Scientist - Epidemiological Modeling of TB in High-Burden Settings. IDM builds software for understanding infectious diseases, their causes, spread, and strategies for control and elimination. Full time research scientist sought to model TB in countries that make large contributions to global TB burden. For more information and to apply, contact [Anna Bershteyn](#)

For more information on TB MAC, or to get involved, please visit www.tb-mac.org or email us directly at tb-mac@lshtm.ac.uk.

Very best wishes,

Richard, Rein, Christina and the TB MAC Committee

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Tweet



Forward

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