

The ShORRT initiative: spotlight on Nigeria

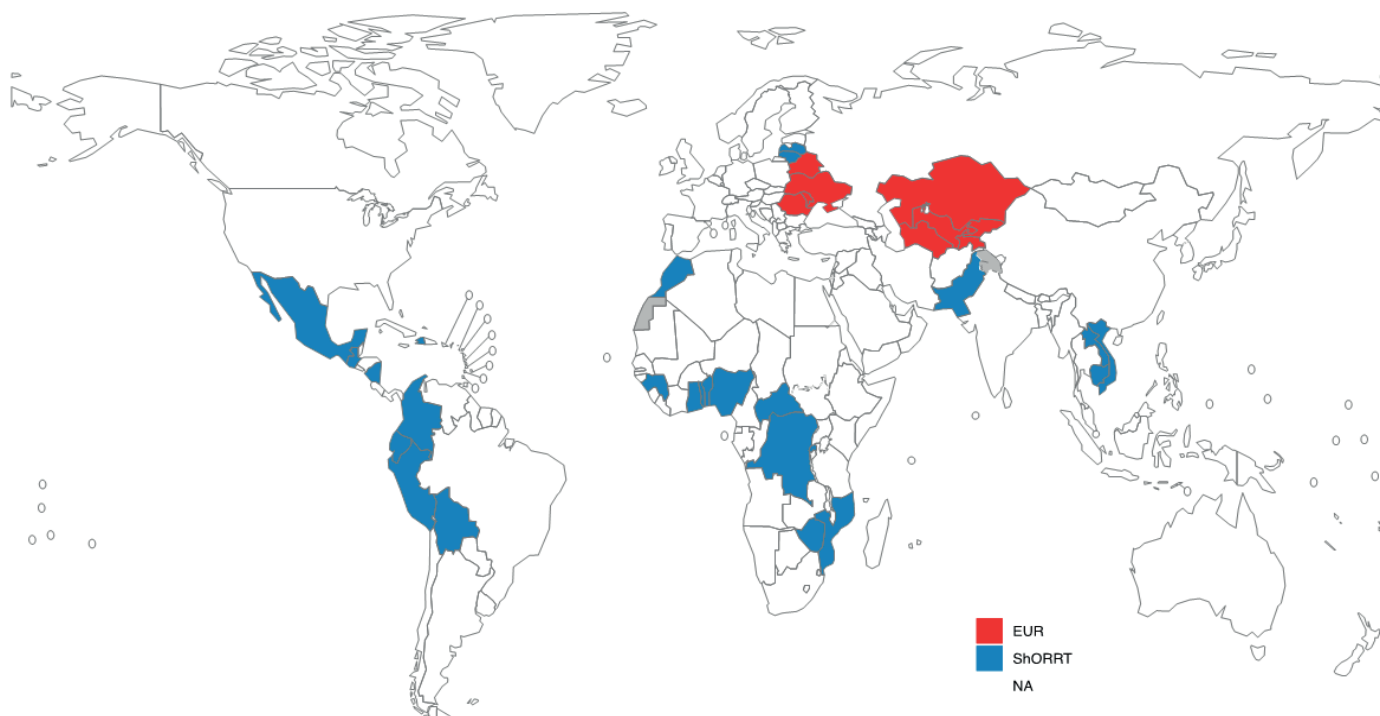


In the latest World Health Organization (WHO) [guidelines on drug-resistant tuberculosis](#) (TB) treatment, modifications to the recommended all-oral treatments for multidrug- and rifampicin-resistant (MDR/RR) TB and novel regimens for patients with extensively drug-resistant TB are encouraged under operational research conditions.

TDR, in collaboration with the WHO Global Tuberculosis Programme and technical partners, has developed an operational research package — **Short all-Oral Regimens for Rifampicin-resistant Tuberculosis**, dubbed **ShORRT** — to support the implementation of such drug regimens.

ShORRT ONE YEAR ON: SUPPORTING 25 COUNTRIES

Since its official launch in November 2019, the ShORRT initiative now involves and supports 25 countries worldwide, working alongside WHO regional and country offices; academia; technical partners such as KNCV Tuberculosis Foundation, the Union and [Damien Foundation](#); and funding agencies such as the United States Agency for International Development (USAID) and The Global Fund to Fight AIDS, Tuberculosis and Malaria.



Countries involved in the ShORRT initiative (blue) and countries involved in the initiative led by the WHO Regional Office for Europe (red).

Nigeria: a pathfinder country develops BESTREAM

Nigeria, which has the highest burden of TB in Africa, is one of the pathfinder countries conducting operational research on modified shorter all-oral regimens for MDR/RR-TB patients, in line with the latest WHO guidelines and national guidance on drug-resistant TB treatment.

Nigeria's National Tuberculosis and Leprosy Control Programme (NTLCP) has adapted the ShORRT research package and developed the *"Bedaquiline-based all-oral Shorter Treatment regime for DR-TB patients- a Modified approach"* operational research project (dubbed BESTREAM). The study, which will involve 400 patients across eight states in Nigeria, aims to evaluate the effectiveness and safety of a modified Bedaquiline-containing regimen (comprised of 6 months of bedaquiline, and 9 to 11 months of linezolid, levofloxacin and clofazimine), as well as its impact on the health-related quality of life of patients.



Launching BESTREAM

The first patients were enrolled in the study in late October 2020 as BESTREAM is being sequentially rolled out in four "intervention" states (where patients will receive the novel all-oral shorter regimen) and four "control" states (where patients will receive the standard of care). Patient enrollment will be ongoing for six months, and preliminary findings are expected at the end of 2021.

BESTREAM, funded by USAID and conducted in close collaboration with Damien Foundation and WHO's Nigeria Country Office, has also paved the way for the implementation of a parallel study in two additional states investigating the BPaL regimen (comprised of bedaquiline, pretomanid and linezolid) supported by [KNCV Tuberculosis Foundation](#).

As the COVID-19 pandemic unfolds, the rapid roll-out of measures that reduce the need for daily encounters between TB patients and healthcare staff becomes more critical. These include the development and adoption of more effective and easier to implement treatment options for people living with TB and DR-TB, such as all-oral shorter drug regimens.



“Operational research is proving to be a tremendous tool for guiding our efforts to manage TB in Nigeria, especially in the context of COVID-19.”

Dr Babawale Adekunle Victor
Programmatic Management of Drug Resistant Tuberculosis Unit
National Tuberculosis and Leprosy Control Programme, Nigeria

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TDR can conduct its work with partners thanks to the commitment and support from a variety of funders. A full list of TDR donors is available at: <https://www.who.int/tdr/about/funding/en/>.

USAID has contributed designated funding for the development and implementation of the ShORRT initiative and therefore the BESTREAM project in Nigeria.