



International Organization for Migration (IOM)

The UN Migration Agency

**Международная организация по миграции
(МОМ)**

***Migration and Tuberculosis in Europe: Is Pre-Departure
Screening Necessary?***



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Sources of information

- IMPACT OF MIGRATION ON TUBERCULOSIS EPIDEMIOLOGY AND CONTROL IN THE EU/EEA,
Editorial, *Eurosurveillance*, Volume 21, Issue 12, 24 March 2016
- EVALUATION OF IMMIGRANT TUBERCULOSIS SCREENING IN INDUSTRIALIZED COUNTRIES
Manish Pareek, Iacopo Baussano, Ibrahim Abubakar, Christopher Dye and Ajit Lalvani, *Emerging Infectious Diseases* 2012 Sep; 18(9): 1422–1429
- EUROPEAN POLICIES IN THE MANAGEMENT OF TUBERCULOSIS AMONG MIGRANTS
Lia D'Ambrosio , Rosella Centis, Masoud Dara, Ivan Solovic, Giorgia Sulis, Alimuddin Zumla , Giovanni Battista Migliori, *International Journal of Infectious Diseases* 56 (2017), 85–89
- МИГРАЦИОННЫЙ КРИЗИС В ЕВРОПЕ В ЦИФРАХ И ГРАФИКАХ
(http://www.bbc.com/russian/international/2016/02/160219_migrant_crisis_charts)



Migration into EU

Number of migrants
arriving in Europe

- **1,046,599** in 2015
- Over **1,800,000** in 2016

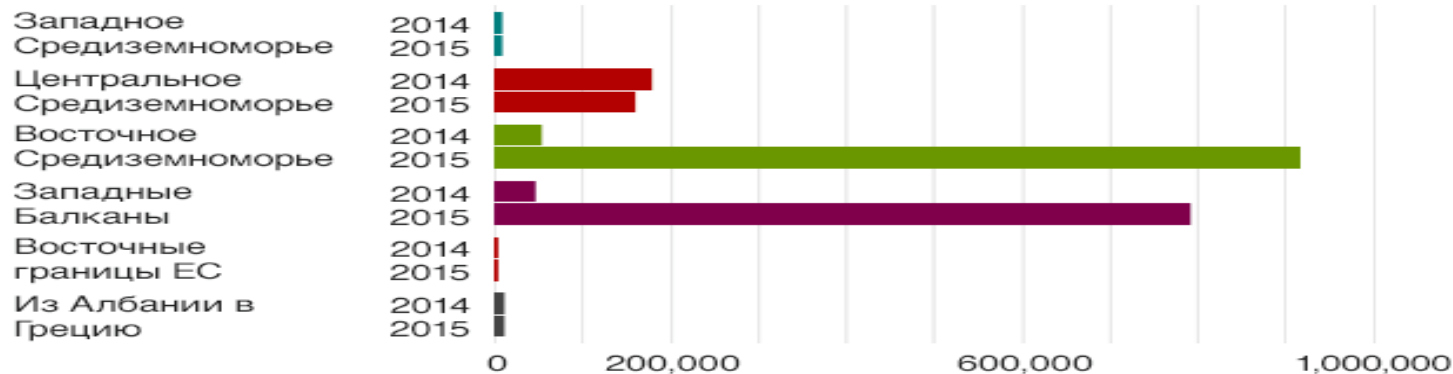
Number of foreign-
born people living in
EU

33.5 million people as of
January 1, 2014



Migration Routes into Europe

Мигранты, обнаруженные при попытке проникнуть в ЕС незаконно, 2014-15



Источник: Frontex

BBC



Migration Routes into Europe

Route	Number of Refugees (as of 2016)
<i>Through Albania and Greece</i>	8932
<i>Arctic: North of Russia to Norway and Finland</i>	6000
<i>East Mediterranean</i>	885386
<i>West Balkans</i>	764038
<i>West Mediterranean</i>	7164
<i>Eastern: From former Soviet republics in EU</i>	1920
<i>Central Mediterranean</i>	153946



Number of asylum seekers, 2015

Заявления о предоставлении убежища в Европе, 2015*



Число заявлений об убежище



■ Нет данных

*Данные на конец года, где возможно, хотя в некоторых странах еще нет данных за октябрь, ноябрь и декабрь.

**На карте также указаны данные по Норвегии и Швейцарии, которые не являются членами ЕС.

Источник: Eurostat

BBC

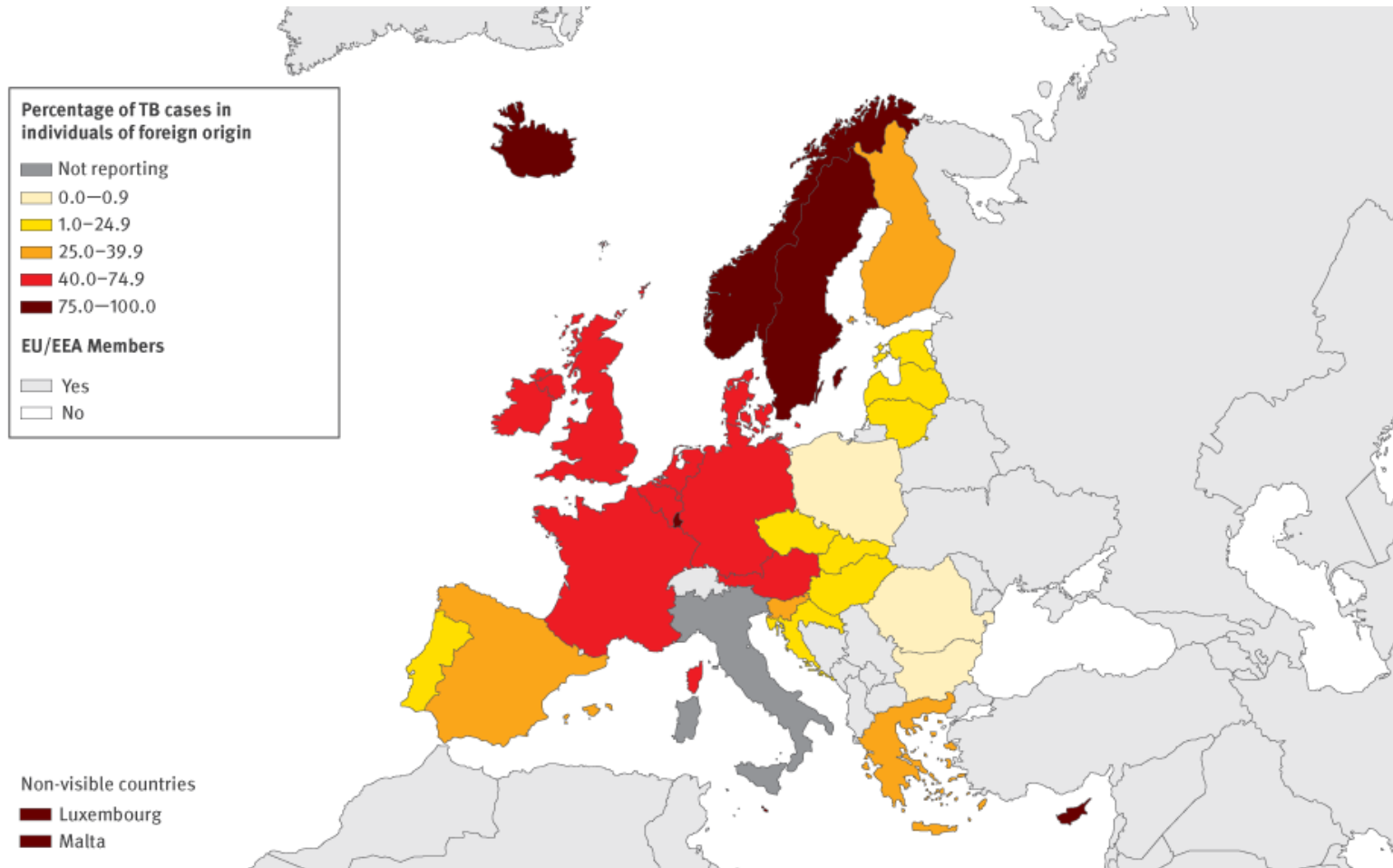


Proportion of foreign-born individuals among TB cases in EU

- In 2014, **15,565 (27%)** were diagnosed in individuals of foreign origin, i.e. is born in a country different to the reporting country
- The proportion of TB cases in individuals of foreign origin increased in the last decade from 20% in 2005 to 27% in 2014



Percentage of TB cases among foreign-born individuals





Percentage of TB cases among foreign-born individuals

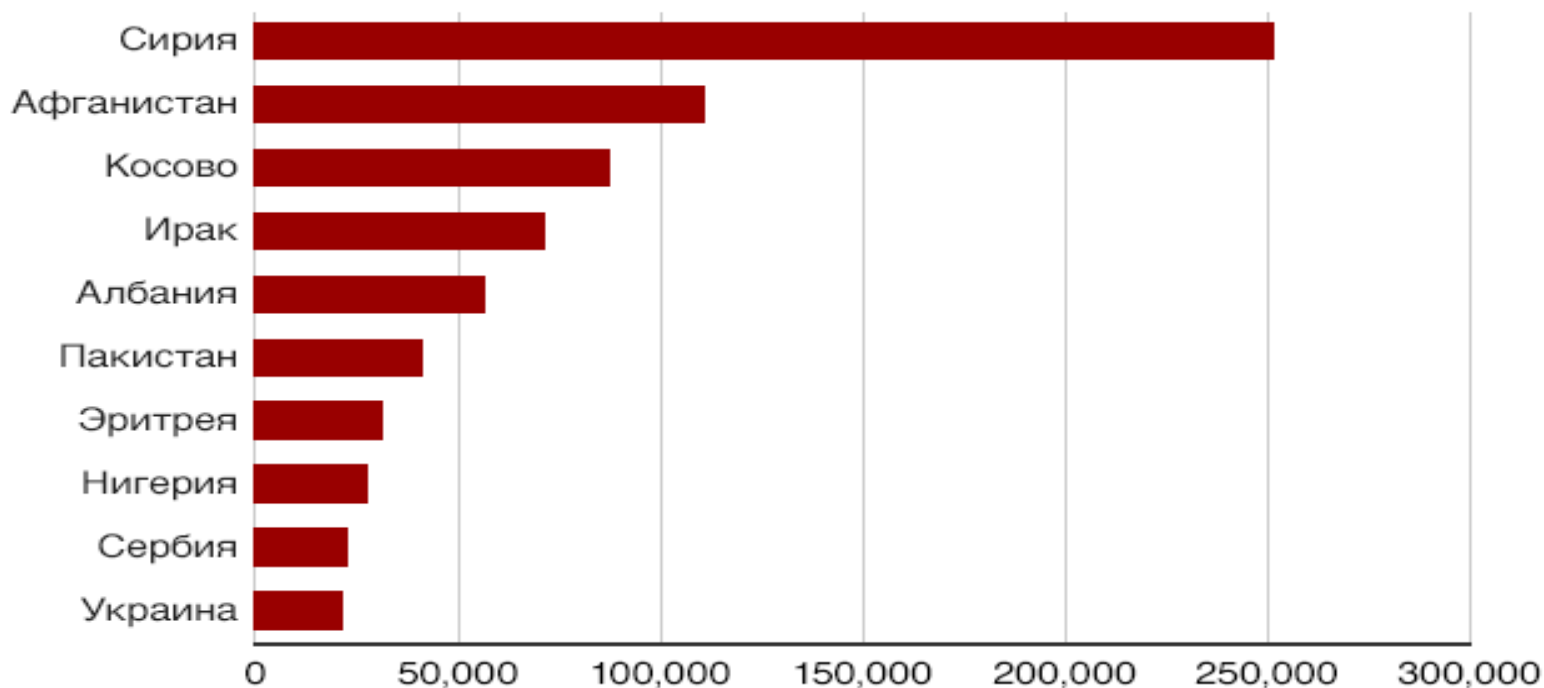
- Country-specific proportions of TB cases in individuals of foreign origin ranged from below 1% in Bulgaria, Poland and Romania to above 75% in Cyprus, Iceland, Luxembourg, Malta, Norway and Sweden).
- Four countries (France, Germany, Spain and the UK) reported 75% of all cases in individuals of foreign origin.



Top refugee-sending countries

Топ 10 стран, чьи граждане обращаются за убежищем в ЕС

Октябрь 2014 - Октябрь 2015, первое заявление



Источник: Eurostat

BBC



Comparison of TB prevalence rates

- The estimated TB incidence in two of the three main countries of origin of the current migrants (Afghanistan, Iraq and Syria) is not substantially different from that in the EU/EEA,
- Afghanistan-189 per 100,000 population
- Iraq - 43
- Syria - 17
- **EU/EEA - 13.2** (range: 3.3 in Iceland to 81.0 in Romania)



Pre-departure screening

- Screening migrants, before, at or after entry, may be considered and is an option that is implemented by some EU countries. It aims at identifying active TB cases before or soon after arrival in the host country to ensure treatment and to limit onward transmission. The timing, extent and procedure of screening applied in the different EU/EEA countries are very diverse



Countries practicing pre-screening for infectious diseases

<i>Country</i>	<i>Pre-departure</i>	<i>At arrival</i>	<i>Post-arrival</i>
<i>Austria</i>	+	-	+
<i>Belgium</i>	+	+	+
<i>Czech Rep</i>	+	-	+
<i>Finland</i>	-	-	+
<i>France</i>	+	-	+
<i>Germany</i>	-	-	+
<i>Greece</i>	-	-	+
<i>Netherlands</i>	-	-	+
<i>Norway</i>	-	+	+
<i>Poland</i>	-	-	+
<i>Sweden</i>	-	-	+





Advantages of pre-departure screening

While most European countries practice post-arrival screening, there are advantages of doing this before departure:

- *Individuals who plan to migrate legally apply for entry visas and can be referred for testing.*
- *TB detection rate during pre-departure screening exceed that inside migrant-receiving countries*
- *The initial diagnosis is overturned in 2,5% to 3,7% of cases*
- *Early detection reduces the infectious phase by 33%*
- *Timely and complete treatment at the country of origin reduces the risk of developing drug-resistant forms of TB*



Medical Certificate

Photo		Migration Health Assessment CHEST X-RAY REPORT Form 04MH_X		1. Assessment Date:
				2. Service Provider Ref. No:
				3. No of Films:
4. Name: _____				
5. Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female		6. DOB: _____		7. Principal Applicant: <input type="checkbox"/> No <input type="checkbox"/> Yes
8. Case No: _____		9. Ind.No. _____		10. Country of stay: _____ / Nat.: _____ Program: Resettlement
11. Place of Assessment: (Writing Address)			12. Doctor: _____	
13. CXR		Not Done <input type="checkbox"/> Normal findings <input type="checkbox"/> Significant findings <input type="checkbox"/>		b) For the reason: Age <input type="checkbox"/> Pregnancy <input type="checkbox"/> Other <input type="checkbox"/>
14. From the Medical file: _____				
a) TB signs or symptoms <input type="checkbox"/> b) Contact with TB patient <input type="checkbox"/> c) History of TB <input type="checkbox"/>				
15. Chest X-ray Interpretation by the Radiologist				
<input type="checkbox"/> Infiltrate or consolidation	<input type="checkbox"/> Discrete fibrotic scar or linear opacity	<input type="checkbox"/> Musculoskeletal		
<input type="checkbox"/> Any cavitary lesion	<input type="checkbox"/> Discrete nodule(s) without calcification	<input type="checkbox"/> Cardiac or major vessels		
<input type="checkbox"/> Nodule with poorly-defined margins (such as tuberculoma)	<input type="checkbox"/> Discrete fibrotic scar with volume loss or retraction	<input type="checkbox"/> Pulmonary		
<input type="checkbox"/> Linear, interstitial markings (children only)	<input type="checkbox"/> Discrete nodule(s) with volume loss or retraction	<input type="checkbox"/> Other		
<input type="checkbox"/> Pleural effusion	<input type="checkbox"/> Upper lobe retraction or volume loss			
<input type="checkbox"/> Hilar/Mediastinal adenopathy	<input type="checkbox"/> Other (such as bronchiectasis)	<input type="checkbox"/> Other X-ray findings		
<input type="checkbox"/> Other (such as miliary findings)				
<input type="checkbox"/> Can suggest Active TB (need smears)		<input type="checkbox"/> Can suggest INACTIVE TB (need smears if symptomatic)		
16. Descriptive Findings: / Comment on Abnormalities				
				
17. Date: _____ <i>(Day/Month/Year)</i>		18. Radiologist's Signature: _____		



Thank you!