Tuberculosis profile

Population :	2013
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		Rate
Estimates of TB burden * 2013	Number (thousands)	(per 100 000 population)
Mortality (excludes HIV+TB)	1.3 (1.1–1.5)	25 (22–28)
Mortality (HIV+TB only)	0 (–)	0 (–)
Prevalence (includes HIV+TB)	5.4 (2.5–9.4)	103 (47–180)
Incidence (includes HIV+TB)	3.8 (3.1–4.6)	72 (59–87)
Incidence (HIV+TB only)		
Case detection, all forms (%)	80 (67–99)	

Estimates of MDR-TB burden * 2013	New	Retreatment
% of TB cases with MDR-TB	3.8 (1.1–9.5)	18 (11–28)
MDR-TB cases among notified pulmonary TB cases	85 (25–210)	170 (100–250)

TB case notifications 2013	New **	Relapse
Pulmonary, bacteriologically confirmed	1 220	272
Pulmonary, clinically diagnosed	1 028	
Extrapulmonary	526	

Total new and relapse	3 046
Previously treated, excluding relapses	629
Total cases notified	3 675

New	Retreatment	Total **
		81
		81
	New	New Retreatment

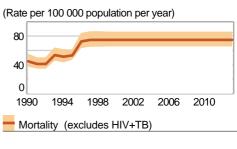
TB/HIV 2013	Number	(%)
TB patients with known HIV status		
HIV-positive TB patients		
HIV-positive TB patients on co-trimoxazole preventive therapy (CPT)		
HIV-positive TB patients on antiretroviral therapy (ART)		
HIV-positive people screened for TB		
HIV-positive people provided with IPT		

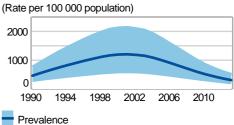
Treatment success rate	(%)
New cases registered in 2012	84
Previously treated cases registered in 2012	63
HIV-positive TB cases, all types, registered in 2012	
RR-/MDR-TB cases started on second-line treatment in 2011	
XDR-TB cases started on second-line treatment in 2011	

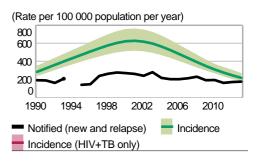
Laboratories 2013	
Smear (per 100 000 population)	1.2
Culture (per 5 million population)	2.9
Drug susceptibility testing (per 5 million population)	2.9
Sites performing Xpert MTB/RIF	4
Is second-line drug susceptibility testing available?	No

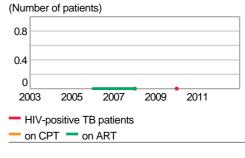
Is second-line drug susceptibility testing available?	No
Financing TB control 2014	
National TB programme budget (US\$ millions)	
% Funded domestically	
% Funded internationally	
% Unfunded	

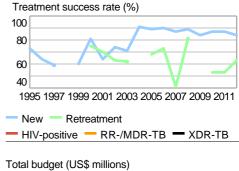
^{*} Ranges represent uncertainty intervals

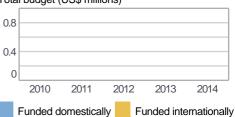














^{**} Includes cases with unknown previous TB treatment history

Information on HIV

By the end of 2012, Turkmenistan authorities had reported a cumulative total of just two HIV cases, one male and one female, to the WHO Regional Office for Europe and the European Centre for Disease Prevention and Control (ECDC), one of whom developed AIDS and died.

Six public health facilities offer HIV testing and counselling services. Almost no other national data are available.

A leading at risk population is thought to be people who inject drugs, due to the country's proximity to Afghanistan and the opiates that are transported through central Asia. Extensive prevention programmes have been undertaken in the country with the assistance of the WHO, the United Nations Children's Fund (UNICEF) and other agencies. However, no official information is being reported about the national response to HIV and an appropriate surveillance system needs to be developed. Unofficial reports indicate a substantial and unaddressed epidemic in progress.

Sources:

European Centre for Disease Prevention and Control/WHO Regional Office for Europe. HIV/AIDS surveillance in Europe 2013. Stockholm, European Centre for Disease Prevention and Control, 2014

UNAIDS, WHO, UNICEF. Joint Global AIDS Response Progress Reporting (GARPR) and health sector progress reporting.