

**REMARKS BY PREMIER TSP MAKWETLA AT THE OFFICIAL OPENING OF THE AIRBORNE INFECTION RESEARCH FACILITY
Witbank, 28 January 2005**

Programme Director
MEC Pogisho Pasha and staff from your department
Dr Bernard Fourie and your staff from the Medical Research Council
Dr Edward Nadell from the Harvard School of Public Health
Our research collaborators and donors from the US and South African governments
Distinguished guests
Ladies and Gentlemen

I am delighted to be here today to open the Airborne Infection Research Facility because it gives me the opportunity to congratulate those who are involved with this exciting development. It also offers me a chance to thank all the donors for their generous support to a project we believe will be very beneficial to our province and our country.

Nine months ago, on the occasion of the first convocation of the present Mpumalanga Legislature, we promised that we would improve service in health facilities through better training, recruitment and retention of health personnel.

We also promised that we would work towards the improvement of the general environment and functioning of clinics and hospitals and other places of public service, whilst ensuring there is a concerted and co-ordinated campaign of health promotion and awareness. Our health facilities would have the latest and most appropriate equipment and we would ensure that we maintain a quality of service that is in line with what our people expect.

It was on that occasion that we undertook to intensify our fight against HIV and AIDS, TB, malaria, diabetes, hypertension, malnutrition and other illnesses. We also used the occasion to call on all our departments to establish partnerships with research centers in order to augment our capacities.

The opening of this facility is evidence that the public service that we lead in Mpumalanga, has indeed taken that call to heart. This facility, I am told, is an updated version of the classic experimental tuberculosis ward envisioned in the US in the late 50's and early 60's.

In those remarkable studies, exhaust air from a six-bed TB ward was pumped to one or two large colonies of guinea pigs, which served as living quantitative air samplers of human-generated TB over a period of four years. Guinea pigs were used because, then as now, it is not easy to culture TB organisms directly from room air.

Those pioneering studies proved for the first time that TB is airborne and quantified its highly variable infectiousness, correlating transmission to clinical and bacteriologic factors, including cough frequency, lung cavitation, drug resistance, and response to treatment.

Today Tuberculosis or TB, still among the world's greatest killers, is predominantly spread indoors by the airborne route. Lessons learned about TB and the control of the disease, can be applied to other agents that have airborne potential, such as influenza, SARS, and smallpox – three agents of immediate global concern.

The management of Tuberculosis and in particular, multi-drug resistant tuberculosis or MDR TB, remains one of the priority challenges in Mpumalanga. Treatment interruption is our biggest concern as this leads to low cure rates and in turn, results in a high prevalence of multi-drug resistant TB.

The MDR survey conducted by the South African Medical Research Council in 2002 found that the prevalence of multi-drug resistant TB in newly diagnosed patients in Mpumalanga was 2,7%. This figure is approaching the World Health Organisation 'hot spot' level of 3%.

This situation is receiving priority attention in the Department of Health and Social Services.

The association between TB, and HIV and AIDS-related diseases has given a negative effect to TB management. Patients with TB are reluctant to present early for treatment due to the stigma attached to HIV and AIDS. This results in low levels of case detection.

The Department of Health and Social Services is, in addition to the DOTS strategy, focusing its attention on increasing awareness through advocacy and social mobilisation. The personal motivation of TB patients to comply with treatment regimes is also being emphasised and from this year, Home Based Care workers will receive training in DOT support.

Thankfully, the department has not been alone in its fight against the scourge of TB. The Health Services in this part of the country have enjoyed a relationship with SANTA stretching back to 1954 when the HJE Schultz SANTA hospital was constructed, here in Witbank.

SANTA has, through the departmental subsidy, provided affordable in-patient care for TB patients requiring long term admission. This has enabled provincial hospitals to utilize available bed capacity for more acute cases.

Our relationship with the Medical Research Council goes back to 1995, when, together with the World Health Organisation, a model DOTS programme for the country was researched in the province.

Since then, no less than 12 other scientific studies have been undertaken in the province in collaboration with the MRC, relating mainly to the management of tuberculosis and MDR TB. I am proud to inform you that South Africa, through its collaboration with the MRC, is the pioneer country in developing and implementing a standardized MDR treatment regimen. In addition, the 'DOTS-plus' programme for the management of MDR TB currently being implemented in South Africa is one of the biggest internationally.

It is our fervent hope that this facility would at last give us scientific data on whether the polluters of our environment in Mpumalanga contribute to the prevalence and spread of respiratory diseases in the province. Hopefully they would also work out control mechanisms in order to ensure a healthier Mpumalanga.

It now gives us much pleasure to join hands with the renowned international and local organisations present here today to embark on a research project of global significance. It is our sincere hope that the lessons learned from the different components of this research will lead to implementable and cost effective interventions for all countries with a high burden of disease as a result of TB and MDR TB.

We eagerly await the unfolding of the studies in the knowledge that the highest levels of ethical and research standards are being applied to all aspects of the study.

Again, my congratulations to everyone involved in this auspicious project. I wish you success in your endeavours, which will surely benefit us all.

I would now like to declare this facility formally open.

I thank you.