

December 20, 2013

The Honorable Patrick Leahy  
Chairman  
Subcommittee for State and Foreign  
Operations and Related Programs  
Committee on Appropriations  
U.S. Senate  
Washington, DC 20510

The Honorable Lindsey Graham  
Ranking Member  
Subcommittee for State and Foreign  
Operations and Related Programs  
Committee on Appropriations  
U.S. Senate  
Washington, DC 20510

The Honorable Kay Granger  
Chairman  
Subcommittee for State and Foreign  
Operations and Related Programs  
Committee on Appropriations  
U.S. House of Representatives  
Washington, DC 20515

The Honorable Nita Lowey  
Ranking Member  
Subcommittee for State and Foreign  
Operations and Related Programs  
Committee on Appropriations  
U.S. House of Representatives  
Washington, DC 20515

Dear Chairmen and Ranking Members:

We commend your leadership on global health and development on the Appropriations Subcommittee for State and Foreign Operations and Related Programs. In light of the Bipartisan Budget Act of 2013 and appropriations decisions that remain for FY 2014, we write to urge approval of at least \$236 million for USAID's TB program for FY 14, which is the level approved by the House Appropriations Committee.

TB kills an estimated 1.3 million people a year, the second deadliest infectious disease after HIV/AIDS. It is the third leading cause of death among women of reproductive age. One-quarter of these deaths occur among people living with HIV and tuberculosis remains the leading cause of death among people with HIV worldwide. Improper and incomplete treatment has led to the emergence of multidrug-resistant (MDR) TB, extensively drug-resistant (XDR) TB, which are more costly and difficult to diagnose and treat.

The United States, largely through USAID, has a strong record of success in partnering with national governments and international organizations to improve TB control throughout the world. TB incidence has begun to decrease although not rapidly enough to prevent more than 8 million new cases and 1.3 million deaths anticipated in the coming year.

The USAID TB program provides urgently needed technical assistance and programmatic implementation to 30 of the world's most highly burdened countries. USAID is working with countries to strengthen their response to drug-resistant TB by providing technical assistance to upgrade laboratories, improve the quality of treatment in the private sector, and actively find TB cases. The TB program also plays a critical role in successfully leveraging multi-lateral TB resources, including the Global Fund, by assisting countries in the development of grant applications and annual country strategic and operational plans.

USAID is also an important funder of product development and operational research, helping to bring new diagnostics, drugs, and vaccines from the bench to the field:

- New rapid diagnostic tests (like Xpert) have the potential to revolutionize the fight against TB by dramatically reducing the delay in obtaining a diagnosis from days to hours, and helping determine drug sensitivity. In fact, USAID played an essential role in the development and roll-out of the Xpert rapid diagnostic test.
- Late last year the Food and Drug Administration (FDA) approved the first new TB drug (bedaquiline) in 40 years. Support for promising late-stage clinical trials will be essential to ensure that new regimens, not just individual drugs, are available to shorten and improve existing TB therapies.
- Researchers continue to search for a more effective TB vaccine, with more than a dozen candidates in clinical trials. As vaccine development continues USAID will need to step in to support promising candidates through clinical research.

While we recognize that you face difficult choices in the appropriations process, we urge you to consider TB as an important priority in your FY2014 appropriations bill and avoid any funding reductions. Please let us know if we can provide any further information.

Sincerely,

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American Association of Physicians of Indian Origin

American Thoracic Society

Infectious Diseases Society of America

Public Health Institute

RESULTS

TB Alliance