The Next U.S. President Should Confront the TB Epidemic Head On

Leading organizations respond to new data showing the TB epidemic is even bigger than previously thought


Washington, DC, October 13, 2016 — Today the World Health Organization released new data showing that the tuberculosis (TB) epidemic is worse than previously known, with over 10 million people falling sick last year. In response to much higher estimates of TB cases, deaths, and drug resistance, eight leading U.S. organizations released the following statement:

Despite being preventable and curable, the world has allowed TB to become the single biggest killer by an infectious disease. Left untreated, the disease has a devastating effect on patients and vulnerable communities. And today’s data proves that the epidemic is even worse than previously reported.

The next U.S. president must confront the TB epidemic head on, devoting much greater funding and attention to this epidemic and taking advantage of the latest technological innovations. We need bold leadership from the U.S., not unfunded action plans.

The world has committed to ending the TB epidemic by 2030. We have made progress towards this goal with new child-friendly TB medicines and new diagnostic tools, but we cannot stop there. Antimicrobial resistance is a real threat, and today there are forms of TB that are virtually untreatable.

We need investments in new TB drugs, vaccines, and advanced molecular diagnostics, and we need a shorter and less toxic drug-resistant TB regimen. Yet new tools are just part of what we need to reach our goal — they are only as good as the financial resources and political commitment we put behind them.

Only 3 percent of the total $8.5 billion in U.S. global health funding goes to programs specific to TB. It has been 16 years since U.S. bilateral TB funding has seen a substantial increase, despite the escalating threat of drug-resistant TB. Instead, for five years in a row, the Obama Administration has proposed cuts in bilateral TB funding. And while TB
causes one in three AIDS deaths, TB-HIV funding from PEPFAR is only about 4% of its annual expenditures, declining since 2011 as PEPFAR funding has flattened.

Programs addressing TB in the U.S. have resulted in a societal benefit of $6.7-$14.5 billion, according to the CDC. Yet, funding for U.S. TB Programs decreased by 5% between 2011 and 2015. The U.S. has also committed to an ambitious response to antimicrobial resistance, but without a well-funded and focused effort to stop multidrug-resistant TB (MDR-TB), this response will be incomplete.

**A response to global TB from the next administration and Congress should include:**

- Funding to implement the White House National Action Plan for Combatting MDR-TB, including doubling bilateral funding to fight TB.
- Ensuring drug resistant TB is central to the response to antimicrobial resistance (AMR).
- Providing technical assistance and mentoring to help countries prevent and treat all forms of TB.
- Boosting TB research and development to develop new vaccines, treatments and diagnostics.
- Increasing the U.S. domestic response to TB, to fully support the currently unfunded prevention and treatment of latent TB infection.

**Organizational Statements**

"By every measure, the TB epidemic is worse than we knew, making the already underfunded and insufficient global response even more glaring. But the challenges we face are as much about politics and about our priorities as they are about science," said Dr. Joanne Carter, Executive Director of RESULTS and RESULTS Educational Fund. "Here in the United States, we need the next administration and Congress to help us reverse course. This includes increased investment and political leadership, and a push for a UN high level meeting to address the epidemic."

"Untreated TB means an agonizing death, as the disease consumes the lungs. But if we scale up even existing technologies we can make an enormous difference. If we also invest in research we can beat TB. We need action from the next President, not words," said Dr. Michael Rich, Co Leader of the endTB project at Partners in Health, and Assistant Professor at the Harvard Medical School, Department of Global Health and Social Medicine.
"The next US President must confront the TB epidemic head-on, by devoting much greater funding and attention to this epidemic, and leveraging technological innovations to combat TB. We require bold leadership from the US, not unfunded action plans," said Mark Harrington, Executive Director, Treatment Action Group.

“The 5-year survival rate for extensively drug resistant TB (XDR-TB) is just 20 percent, worse than most forms of cancer. Using the latest TB antibiotics this survival rate can be dramatically boosted, to 80 percent, but increasing access to these antibiotics has been far too slow. We need the next President to lead the world to end TB,” said Christine Lubinski, Vice President for Global Health, IDSA

“TB cases in the US increased for the first time in over 20 years in 2015, and the CDC states that 'progress toward TB elimination in the United States appears to have stalled.' History shows that when we ignore TB it comes back with a vengeance. The next President must increase support for state and local programs, while also addressing TB globally,” said Donna Wegener, Executive Director, National TB Controllers Association.

"TB Alliance is working to advance several promising regimens to tackle TB, in all its forms. However, there is a commensurate need for funding. Only in providing the funding needed can we hope to transform the promise in the pipeline to millions of lives saved," said Mel Spigelman, President and Chief Executive Officer of the Global Alliance for TB Drug Development (TB Alliance)

“The new report from the World Health Organization tells us that the ongoing TB epidemic is even larger than previously thought,” said Jacqueline E. Shea, PhD, Aeras CEO. “This new data underscores the urgent need for investments to develop new tools, including drugs, diagnostics and vaccines to eliminate TB.”

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