

IDSA Statement for 146th WHO Executive Board Meeting February 2020

Item 10: Ending TB

Global Health Council supported by the Infectious Diseases Society of America and the Global Health Technologies Coalition commends WHO and member states on accelerating efforts to meet global TB elimination goals. Despite some progress the world is not on track to end the TB epidemic by 2030. If progress continues at the current rate, 28 million people will die by 2030 at a global economic cost of \$983 billion. New investments by member states in TB research and development (R&D) coupled with efficient technology assessment and evaluation of new TB products by WHO will be vital to building the arsenal of tools required to detect, prevent, and treat this infectious disease.

While there was an increase in the number of people diagnosed and placed on treatment in 2018, an estimated 3 million people with active TB infection continue to go undiagnosed and untreated. High burden countries are too often relying on old technologies, highlighting the need for investments in new drugs, vaccines and diagnostics including rapid molecular and point of care diagnostics, TB preventive therapies, and shorter, better quality treatment regimens to ensure adherence as well as to mitigate debilitating side effects.

Growing resistance to TB is making the disease more deadly and difficult to treat. A new vaccine would be a gamechanger in epidemic control and is critical for addressing growing rates of antimicrobial resistance (AMR) by reducing the need for antibiotics. As TB is the most prevalent drug resistant infection, strengthening efforts against drug resistant TB is critical for curbing the AMR crisis.

We support the objectives and recommendations outlined in the draft global strategy for TB research and innovation and call on member states to close the \$1.3 billion funding gap for TB R&D annually. We support the recommendation to set a member state target contribution and ask members to dedicate just 0.1% of annual total gross domestic R&D expenditure on TB R&D. Most importantly, new tools must be accessible to the people who need them the most, as new treatments still remain out of reach for too many TB patients. Without a renewed commitment and investment from WHO and member states in research and development, and capacity building for uptake of new technologies, we won't be able to end the epidemic.