

TB: an orphan disease?

By  Danette Breitenbach

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It is estimated that every year 10 million people fall ill with Tuberculosis (TB). Like Covid-19, TB is an airborne disease, and it is the most infectious killer after Covid-19. A preventable and curable disease, this year 1.2 million fewer people have been diagnosed and treated for TB.



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In 2018 the United National High-Level Meeting (UNHLM) on TB set the target for the diagnosis and treatment of 40 million people with TB in the period 2018-2022, with UN Sustainable Development Goals (UN SDG) to eradicate TB by 2030.

But the Covid-19 pandemic has impacted severely on this goal. The Stop TB Partnership, a UN hosted entity committed to end the disease by 2030, says that this has pushed the TB response back a decade.

“The impact of the Covid-19 pandemic has been severe, reversing hard-won gains in the fight against TB,” says Dr Tereza Kasaeva, director of the World Health Organisation Global Tuberculosis Programme.

Worse numbers

In May 2020, a modelling study conducted by the Partnership in collaboration with Imperial College, Avenir Health, Johns Hopkins University and USAID predicted that Covid-19-related measures would have a devastating impact on TB.

The actual numbers were even worse than expected.

In 2019, 1.4 million people died from TB, more than HIV/AIDS (700,000 deaths) and malaria (410,000 deaths) combined, with only 7.1 million receiving treatment.

However, in 2020 even less people received treatment. It is estimated 5.7 million people received treatment for TB - a drop of 21% from 2019. This has left an estimated 4.3 million people with untreated TB.

Global projections, based on data from 27 countries representing around 73% of the global burden of TB, show that less than 85% of the UNHLM target will be achieved.

"We are in a disaster in TB," says Dr Lucica Ditiu, executive director of the Stop TB Partnership.

Dismal funding

The Covid-19 pandemic is not the only barrier to achieving the UNSDG for TB; it is the dismally low levels of funding represent the main barrier to achieving these goals.

"We always knew that ending TB by 2030 was going to be an uphill battle, but Covid-19 and the reduced funding for TB have sent us rolling further down the hill than anyone could have expected," says Ditiu.

What Covid-19 has done is expose the lack of human and financial resources as well as political will, needed to combat this disease.

Funding the TB fight comes mainly from domestic budgets, which provides 85% of the funding. Only two-thirds of the remaining 15% is provided for by the Global Fund to Fight AIDS, Tuberculosis and Malaria (the Global Fund).

The Global Fund is an international financing and partnership organisation that aims to attract, leverage and invest additional resources to end the epidemics of HIV/AIDS, tuberculosis and malaria to support attainment of the UN SDG.

While the fund is the biggest external donor to TB programmes, it only allocates 18% of its resources to fighting TB - despite TB causing over half the deaths of all the diseases the fund serves.

It is the low and middle countries that rely on this external funding the most.

Only half the commitment, \$6.5bn, made at the UNHLM on TB in 1918 has being available for TB prevention.

Barrier to new tools

The lack in the funding promised for new tools, with only \$900m out of the \$2bn provided, is another major barrier.

This has meant TB diagnostics have not been modernised with access to rapid molecular tests and scaling up active TB case finding not improved.

In 2020 only 28% of people were diagnosed with a rapid modular test, with 72% diagnosed using technology that is outdated and very old.

"We need new tools, such as rapid diagnostics and these should all be possible, because we have seen this with Covid-19," says Cheri Vincent from the United States Agency for International Development (USAID).

"We know our road map, and we know it works as countries such as Zambia have shown," says Vincent.

To date Zambia has achieved 89% of its UNHLM targets. In 2019 and 2020 the southern African country surpassed its yearly targets.

Doubling funding

Austin Arinze Obiefuna, executive director of Afro Global Alliance, and incoming vice-chair of the Stop TB Partnership Board, says TB funding needs to be doubled to avert disaster.

“We cannot give up on the TB targets, but we need more resources, especially funding. We need to call for double funding without delay now otherwise we face disaster.”

“Despite being one of the leading infectious disease killers in the world, TB remains an orphan disease, never a political priority and never high up on funding agendas,” he adds.

ABOUT DANETTE BREITENBACH

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