

## TASK FORCE: Tuberculosis

### Turning the tide on a killer disease

#### UN Millennium Task Force provides blueprint to fight disease that kills millions despite existence of effective treatments

17 January 2005, New York—The worldwide tuberculosis (TB) epidemic claims 2 million lives each year and in some parts of the world, is getting worse. TB is the leading AIDS-related killer, and in some parts of Africa, 75 percent of people with HIV also have TB. This epidemic can be stopped.

An effective global TB treatment programme is now in place. What's needed is a massive, rapid push to bring the solution to poor communities in developing countries, according to the UN Millennium Project Task Force on HIV/AIDS, Malaria, TB, Other Major Diseases and Access to Essential Medicines.

*Meeting the Millennium Development Goals: Reversing the Global Incidence of Tuberculosis*, the final report of the findings of the TB Working Group of the Task Force were released today as part of a global action plan for fighting poverty, disease and environmental degradation in the developing world. The group was led by **Dr. Jaap Broekmans**, Director of the Royal Netherlands Tuberculosis Association (KNCV). He headed up a team of TB experts from around the world who for the last two years have studied the nature of the epidemic and the practical ingredients of successful interventions. The team believes that, if backed by sufficient and sustained national and international support, its measures provide a blueprint for cutting TB infections and deaths in half by 2015.

“Control of tuberculosis rests on interrupting its transmission through the rapid identification and cure of infectious cases,” the report said. “Fortunately, there is an internationally recognized strategy—DOTS—that is remarkably effective.”

The treatment program for fighting TB—directly observed treatment short course, known as DOTS—has been effective worldwide and treatment success rates have exceeded 80 percent where it has been implemented. The key shortcoming, according to the working group, is that poor communities where TB incidence is highest have yet to see the benefits of DOTS. There is strong consensus across all of the health Task Forces within the UN Millennium Project that efforts to scale-up the treatment of major diseases must occur within the larger effort of strengthening district-level health systems and improving access to them.

The TB Working Group has crafted a plan for TB control that offers concrete steps to turn back the TB epidemic. They include:

- **Providing access for all to high-quality TB care and treatment through DOTS:** Implementing the DOTS strategy requires government commitment to sustained TB control activities, diagnosis with sputum-smear microscopy, a standardized treatment regimen of 6-8 months with directly observed therapy for at least the first two months, a consistent supply of essential anti-TB drugs, and a standardized recording and reporting system.
- **Addressing the TB/HIV emergency now:** TB and HIV/AIDS partnerships must step up collaboration immediately to deliver the expanded strategy to control HIV-related TB. This strategy consists of full implementation of the DOTS strategy and TB preventive treatment in conjunction with HIV prevention and treatment.
- **Accelerating development of critically needed drugs, vaccines and diagnostics:** The development of new tools is the future of advanced TB control. Public-private partnerships are critical in this process, and more investment is needed in all types of TB-related research.

- **Supporting the Global Plan to Stop TB:** The Stop TB Partnership has made enormous progress in improving access to TB drugs, increasing resources for TB control, coordinating technical assistance, promoting approaches to control HIV-related TB, and supporting new public-private partnerships.
- **Stop the spread of multidrug-resistant TB:** Effective DOTS programmes must expand to minimize emergence of further drug resistance; and new treatment guidelines and delivery strategies for MDR-TB patients.
- **Engage all primary care providers in high quality TB care:** Rapid gains in coverage and care are possible where national TB programmes partner with all public and private providers and institutions.

The fight against TB is critical to meeting commitments forged in 2000 at the Millennium Summit, where world leaders agreed to make the fight against poverty—and all of its faces—in developing countries their priority. The summit inspired the Millennium Development Goals, which are built on the recognition that, from health to the environment, from education to gender equality, a growing list of development issues can no longer be managed solely within the boundaries of a single nation.

The working group's strategy for intensifying the fight against TB is part of the UN Millennium Project, which was commissioned by the UN Secretary-General in 2002 to develop a practical plan of action for enabling developing countries to meet the Millennium Development Goals and reverse the grinding poverty, hunger and disease affecting billions of people. As an independent advisory body directed by Professor Jeffrey D. Sachs, the UN Millennium Project submitted its final recommendations in January 2005.

The TB Working Group is part of the Task Force on HIV/AIDS, Malaria, TB, Other Major Diseases and Access to Essential Medicines, one of 10 UN Millennium Project Task Forces that together comprise some 265 experts from around the world, including members of parliament; researchers and scientists; policymakers; representatives of civil society; UN agencies; the World Bank; International Monetary Fund; and the private sector. The UN Millennium Project Task Forces were challenged to diagnose the key constraints to meeting the Millennium Development Goals and present recommendations for overcoming the obstacles to get nations on track to achieving them by 2015.



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