

ID, HIV experts urge more resources for TB

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In honor of World TB Day 2008 (March 24), the Infectious Diseases Society of America (IDSA) and the HIVMA Medicine Association (HIVMA) are urging U.S. policymakers to step up the fight against tuberculosis by committing substantial resources against the disease both at home and abroad.

With drug-resistant strains of TB on the rise and progress in detecting new cases on the decline, resources are needed to support TB care, surveillance, infection control, and research into new drugs, diagnostics, and vaccines.

“The standard test for diagnosing TB is more than 100 years old and it fails to adequately detect the disease in children and people with HIV. The newest class of TB drugs is more than 40 years old and does a poor job on drug-resistant TB. Today’s TB vaccine is more than 85 years old and is not highly effective, and for that reason it is not recommended for routine use in the United States,” said Carol Dukes Hamilton, MD, an IDSA and HIVMA spokesperson who works on TB and HIV in the United States and the developing world.

TB remains one of the leading infectious disease killers worldwide, with about 9 million new cases and almost 2 million deaths each year. In the U.S. alone, about 10 million to 14 million people are estimated to be infected with latent tuberculosis. Active TB can be easily passed to others—even healthy adults and children—simply by breathing the same air. The World Health Organization estimates that nearly half a million cases of TB are resistant to first-line drugs.

In the developing world, TB is the leading killer of people with HIV. The two epidemics fuel each other in a vicious cycle. People with HIV are more susceptible to getting sick and dying from TB if they are exposed, and TB bacteria accelerate the progression of HIV to AIDS. Absent a comprehensive plan to control tuberculosis, this deadly infection threatens to undermine the gains that have been made in saving the lives of persons living with HIV in the developing world.

Legislation in both the House and Senate would devote substantial resources—\$4 billion over five years—to stopping TB in the developing world through the President’s Plan for AIDS Relief (PEPFAR). PEPFAR supports HIV/AIDS programs in 15 countries that comprise 21 percent of the global TB burden and 24 percent of the world’s annual TB deaths. The program offers millions more in support of HIV prevention and treatment activities in scores of other developing countries.

“The U.S. government has been a leader in stopping HIV/AIDS in the developing world,” said Dr. Hamilton. “We must show the same bold leadership on tuberculosis; otherwise, we run the risk of losing ground on control of tuberculosis—including highly drug-resistant TB—and HIV/AIDS.”

Unfortunately, the Bush administration’s proposed budget for fiscal year 2009 includes significant cuts for TB and other infectious disease programs. Especially hard-hit is the U.S. Centers for Disease Control and Prevention (CDC), which would see a cut of nearly half a billion dollars in its total budget. IDSA supports increasing CDC’s overall budget by 15 percent and devoting \$300 million for efforts to prevent, control, and eliminate tuberculosis in the United States. Likewise, IDSA supports increased resources for the National Institutes of Health (NIH)’s TB programs. NIH expects to spend about \$187 million on TB in fiscal year 2009, including \$17 million on efforts to find a new vaccine.

Source: Infectious Diseases Society of America

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