Tuberculosis

Tuberculosis (TB) is the second leading global infectious killer, right behind HIV/AIDS. A bacterium spread mainly by a cough, this airborne disease knows no borders, and it disproportionately affects people in poor and developing countries.

With U.S. leadership and investments, huge strides have been made to ramp up TB programs. Globally, TB prevalence and deaths from TB have been cut by nearly half since 1990. Currently, affected countries themselves provide 89 percent of total spending for TB programs, and this contribution is increasing.

However, TB still killed 1.5 million people globally in 2013, and it sickened a total of 9 million. While TB is curable, its treatment is lengthy, and the disease pushes people further into poverty.

To build foundations for countries to defeat this disease, we must invest more in improving tools for diagnosis, treatment, and prevention. Current TB tools are behind the times and cannot adequately respond to the evolving disease – including drug-resistant strains that are very costly and difficult to treat. The spread of drug-resistant TB is a public health emergency with the percentage of drug-resistant cases growing annually within the total number of TB cases.

Why Funding Matters

U.S. investments in tuberculosis are saving lives and building capacity so that countries can do more to treat and prevent TB. USAID is the lead agency in the U.S. government’s work to respond to TB in 27 of the hardest hit countries.

- **Implementing patient and community-centered approaches:** Many patients go undiagnosed and untreated. USAID builds capacity for community involvement as well as patient-centered approaches that make it easier for patients to get diagnosed and treated.
- **Supporting the Global Fund to Fight AIDS, Tuberculosis and Malaria:** USAID assists in the development of grant applications to the Global Fund and annual country TB plans that lay the basis for success.
- **Strengthening the system:** U.S. support strengthens health systems and laboratories in affected countries, building their capacity to promptly diagnose and treat cases. With assistance from USAID and others, the 27 priority countries nearly doubled the number of multi-drug resistant TB patients enrolled in treatment from 2012 to 2013.
- **Lowering costs:** USAID has helped lower medication costs for drug resistant TB by as much as 32 percent through its contribution to the Global Drug Facility.
• **Funding crucial research:** Because of low investment in research, some of the only treatments available for drug-resistant TB can cause permanent nerve damage and hearing loss. USAID supports research on improved, faster-acting medications, and exciting progress is being made on new formulations.

• **Stopping drug resistant TB in the U.S.:** TB is an airborne disease, and the U.S. reports TB cases every year in every state. Since 2011, the U.S. has spent an average of $14.5 million annually responding to multi-drug resistant TB cases in the US.

### Club des Amis Damien’s Efforts against TB

In the Democratic Republic of Congo (DRC), early identification and treatment of individuals with TB is one of the most important and life-saving strategies to stop ongoing transmission of TB in the community.

In DRC, Club des Amis Damien (CAD), a community-based organization composed of former TB patients, was supported by USAID to expand its activity to seven sub-provinces. Through this expansion, 80 community-based groups comprised of former TB patients were formed and trained to identify and refer individuals with TB symptoms to TB clinics for early diagnosis and treatment.

In 2013, members of the CAD referred 3,082 presumptive TB cases to a TB health facility, out of which 52 percent were confirmed as active TB. Average undetected TB patients infect 10-15 people a year. CAD’s work on early detection is critical in preventing the continued transmission of TB in the community, which saves lives and drives down health and economic costs such as lost wages for sick family members.

### RESULTS’ Request and Funding History

As members of Congress submit annual appropriations requests to the relevant Appropriations Subcommittees, they can show their support for ending the TB epidemic by requesting funding in the State and Foreign Operations Appropriations bill for the TB program within Global Health.

To do so, please submit a formal appropriations request form for the USAID TB account to Senators Graham and Leahy or Representatives Granger and Lowey as Chairs and Ranking Members of the State and Foreign Operations Subcommittees of Appropriations. Contact RESULTS staff Crickett Nicovich for support: [cnicovich@results.org](mailto:cnicovich@results.org).

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>FY12</th>
<th>FY13</th>
<th>FY14</th>
<th>FY15</th>
<th>RESULTS’ FY16 Request</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuberculosis (USAID)</td>
<td>$236 million</td>
<td>$231.55 million</td>
<td>$236 million</td>
<td>$236 million</td>
<td>$400 million</td>
</tr>
</tbody>
</table>