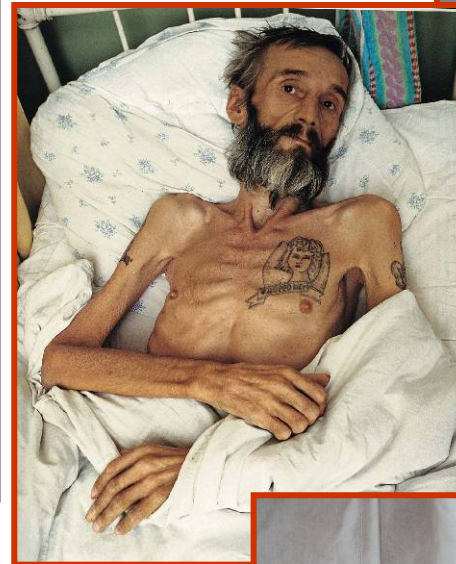


Global TB and HIV-associated TB Situation



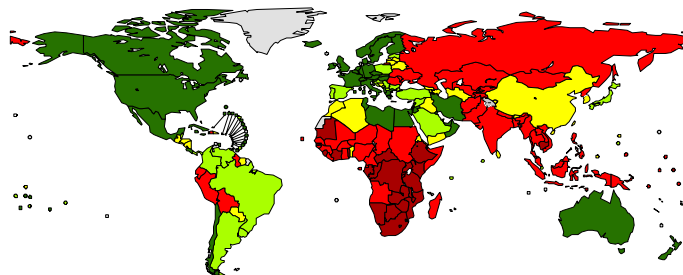
Dr Mario
Raviglione

Director,
Stop TB
Department
WHO
Geneva



UNAIDS PCB Thematic Session
Chiang Mai, Thailand, 23 April 2008

Latest global TB Estimates - 2006



Estimated
number of
cases

Estimated
number of
deaths

All forms of TB

Greatest number of cases in Asia;
greatest rates per capita in Africa

9.15 million
(139 per 100,000)

1.65 million
(25 per 100,000)

Multidrug-resistant TB (MDR-TB)

489,000

~130,000

Extensively drug- resistant TB (XDR-TB)

~35,000

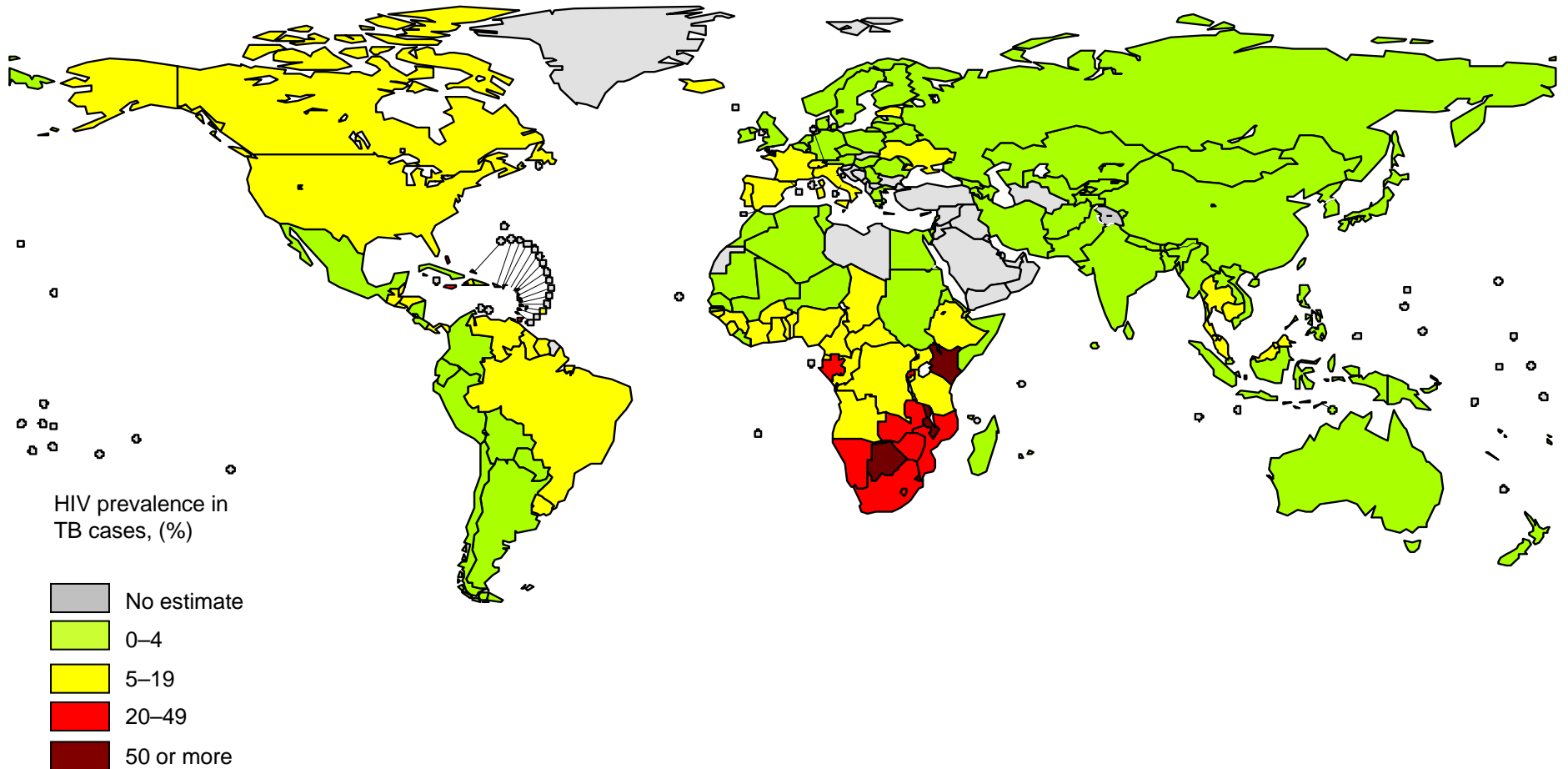
~20,000

HIV-associated TB

709,000 (8%)

231,000

Estimated HIV prevalence in new TB cases, 2006 (N = 709,000)

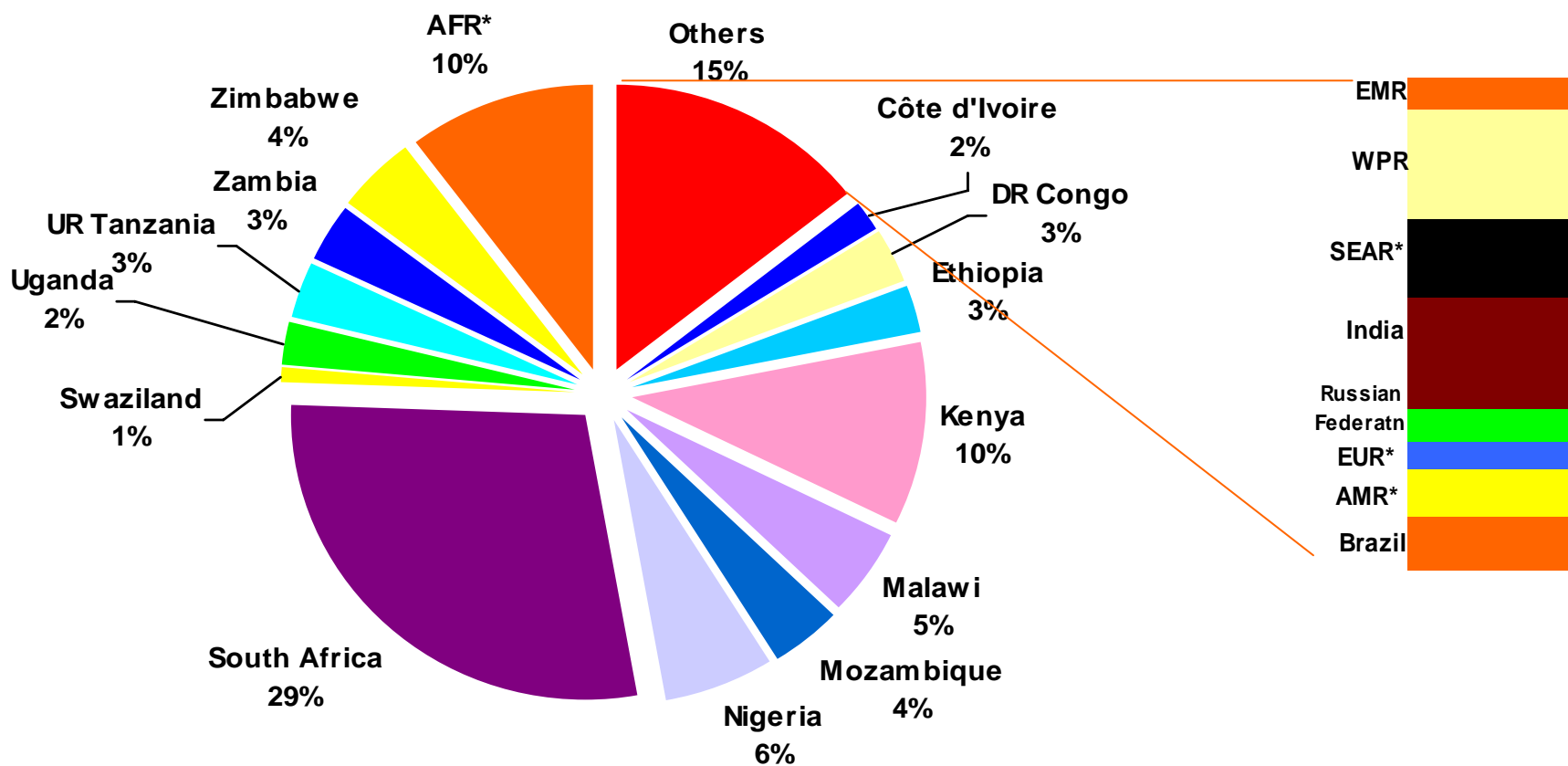


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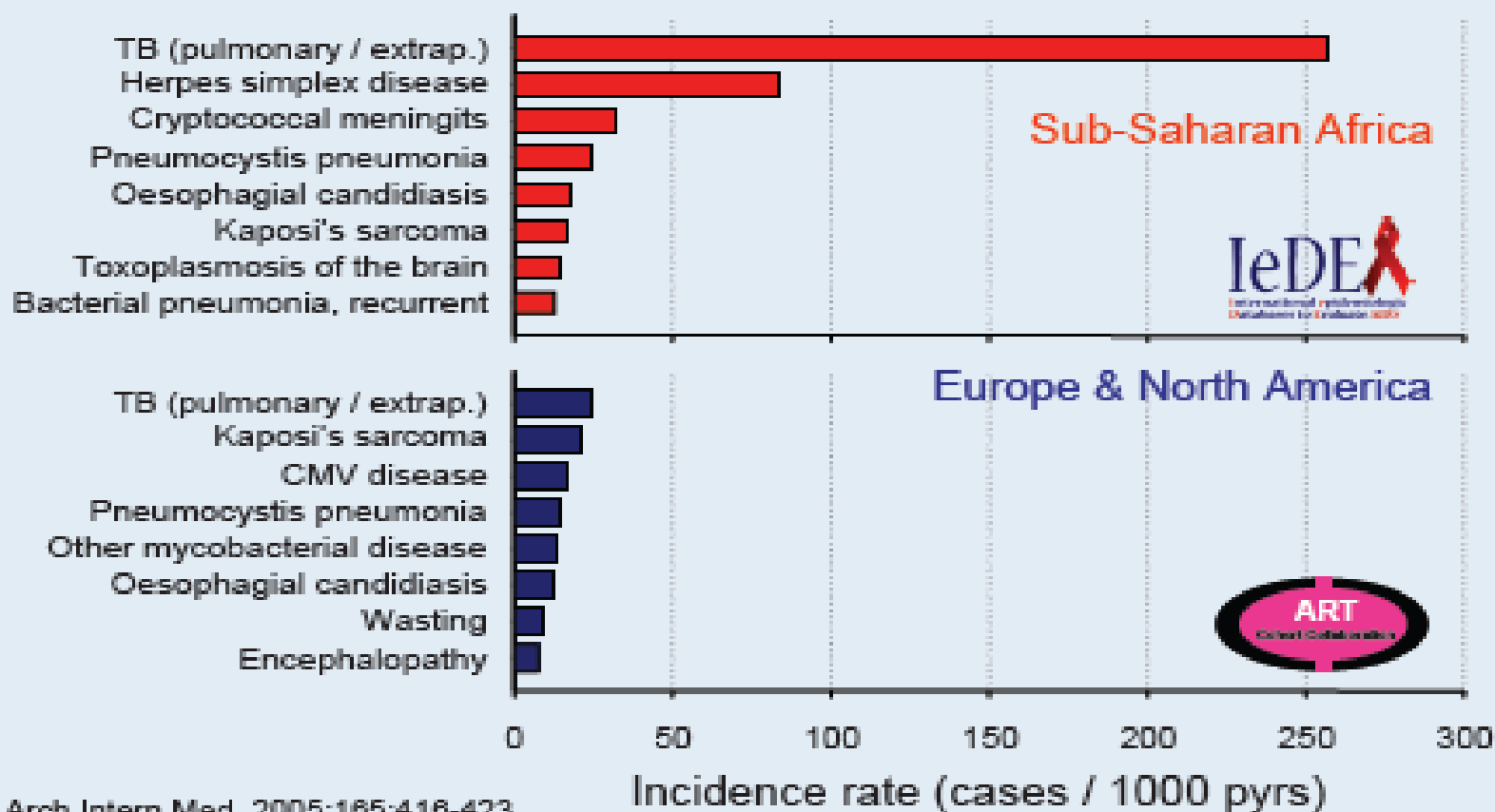
Geographical distribution of estimated HIV-positive TB cases, 2006



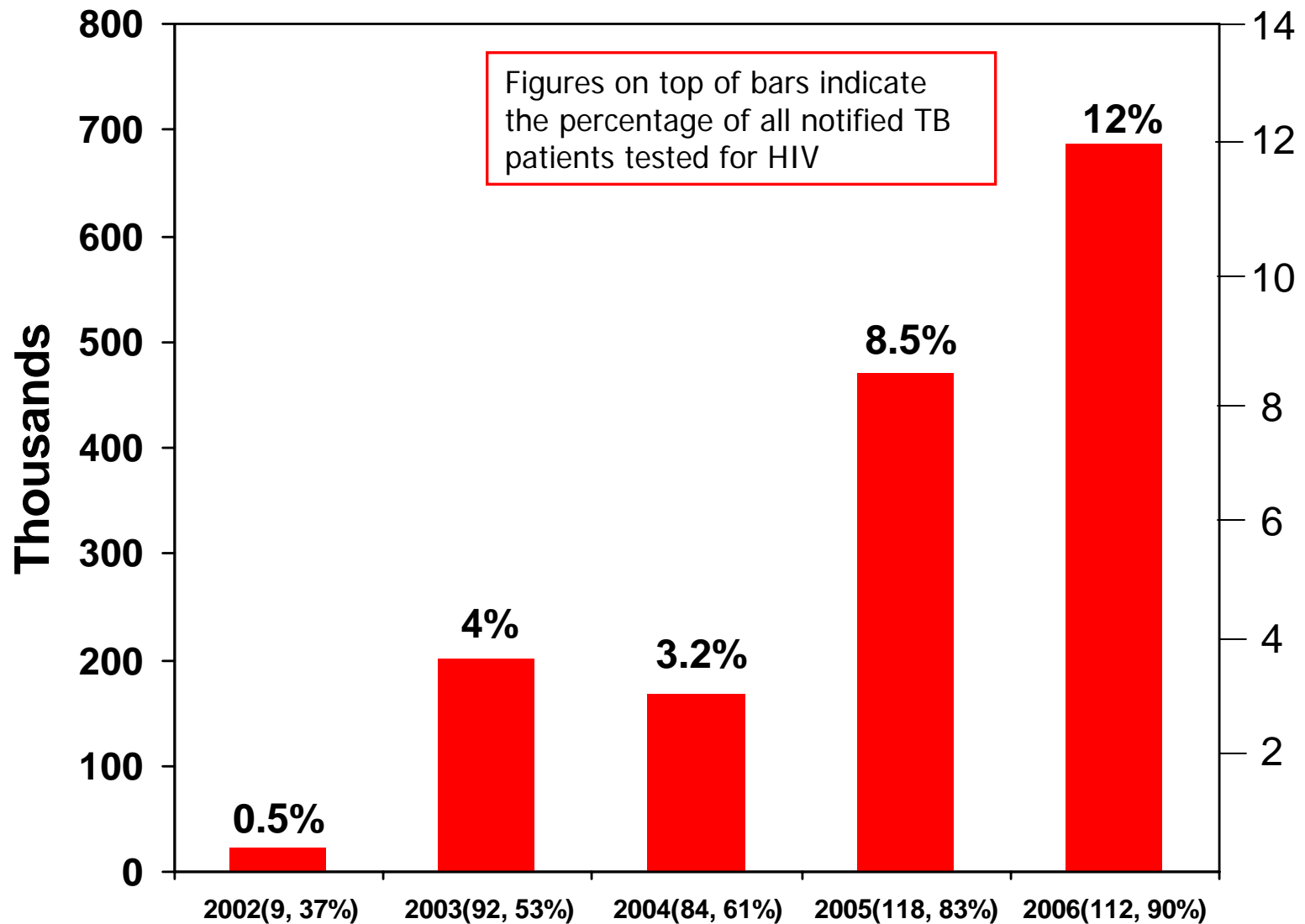
For each country or region, the number of incident TB cases arising in people with HIV is shown as a percentage of the global total of such cases. AFR* is all countries in the WHO African Region except those shown separately; AMR* excludes Brazil; EUR* excludes the Russian Federation; SEAR* excludes India.

TB is the commonest illness among PLHIV on ART

Most common OIs in first 3 months

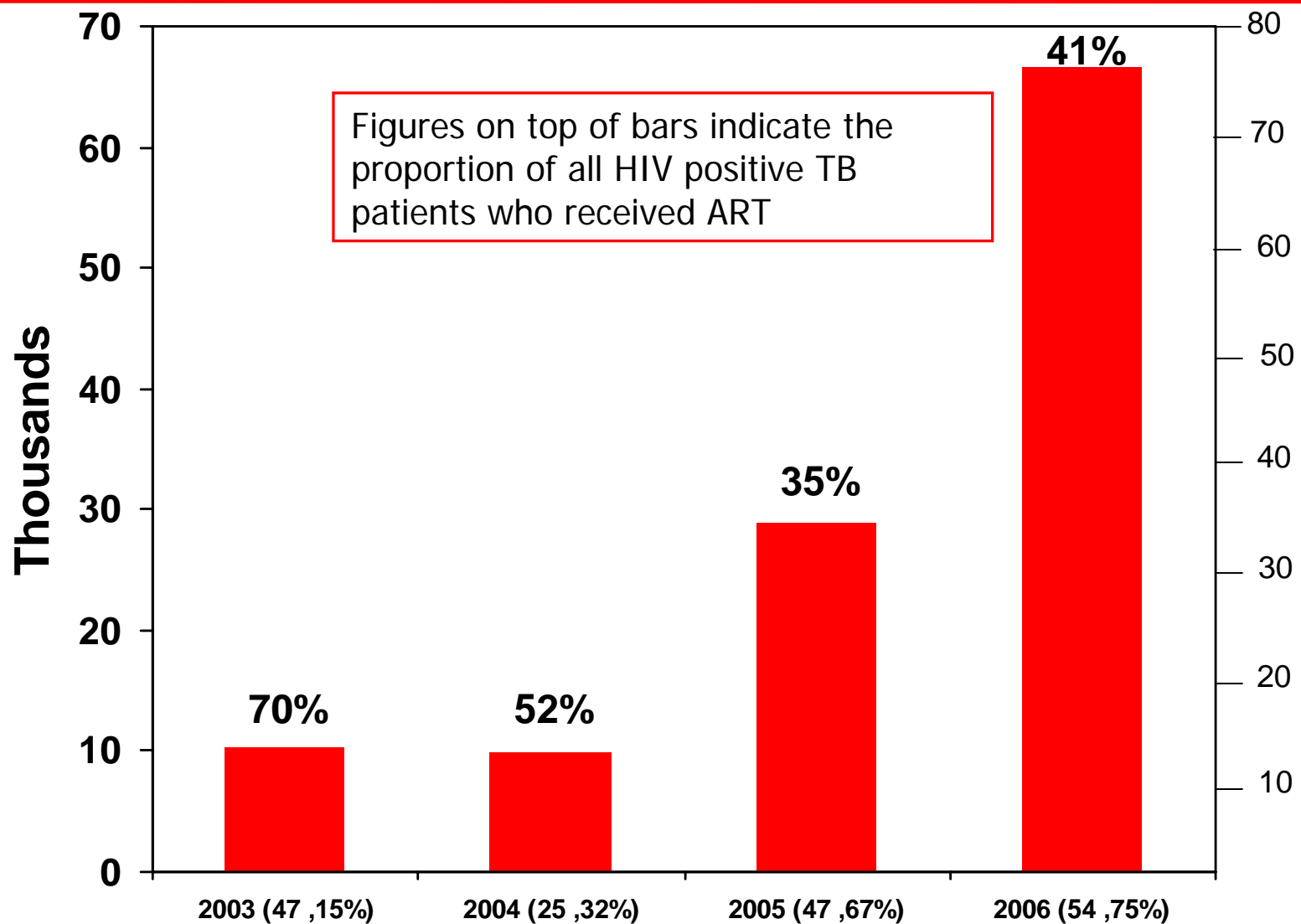


HIV testing for TB patients, 2002-2006



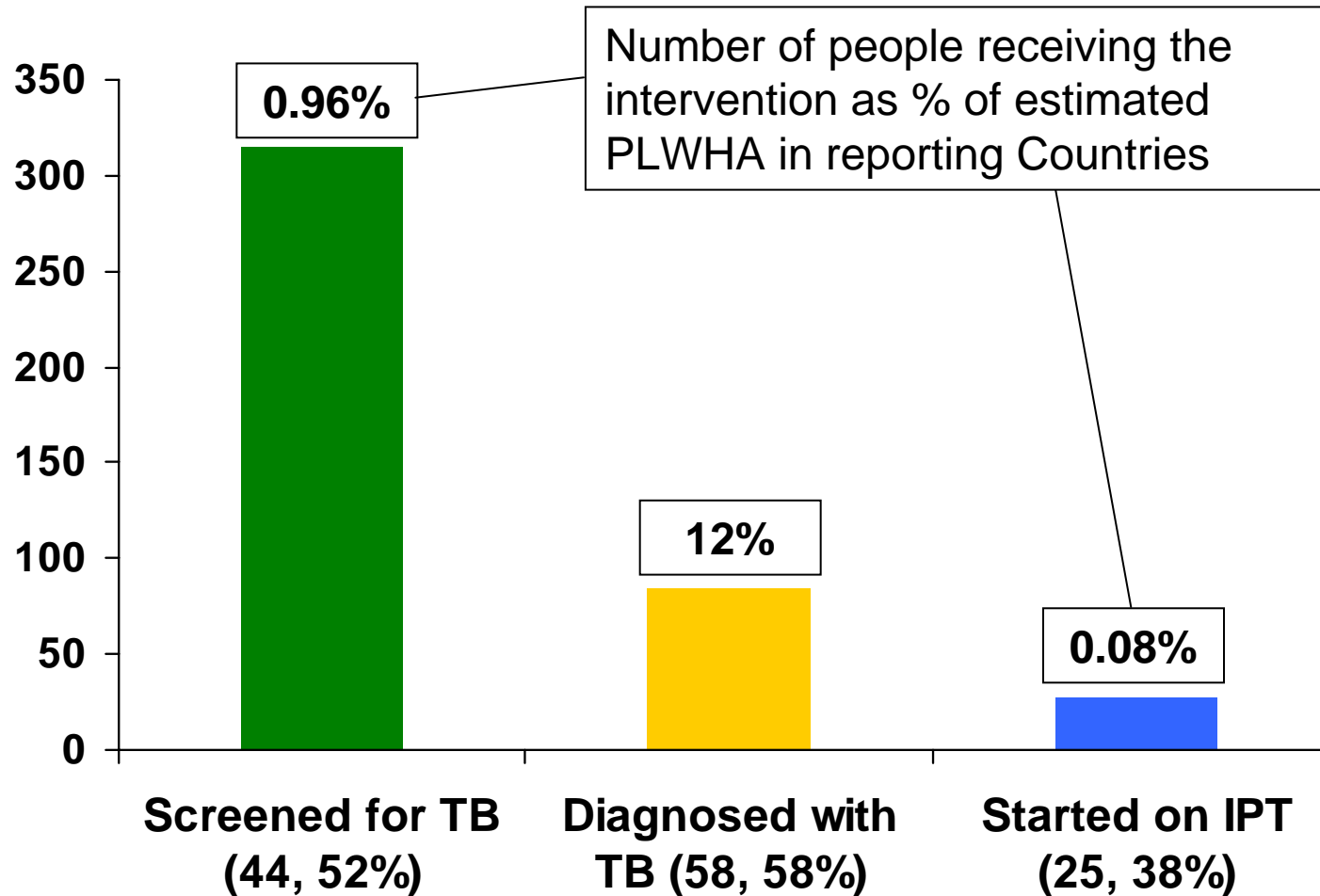
(Number of Countries reporting; % of total estimated HIV+ TB patients accounted for by those Countries)

Antiretroviral therapy for HIV-positive TB patients, 2003–2006



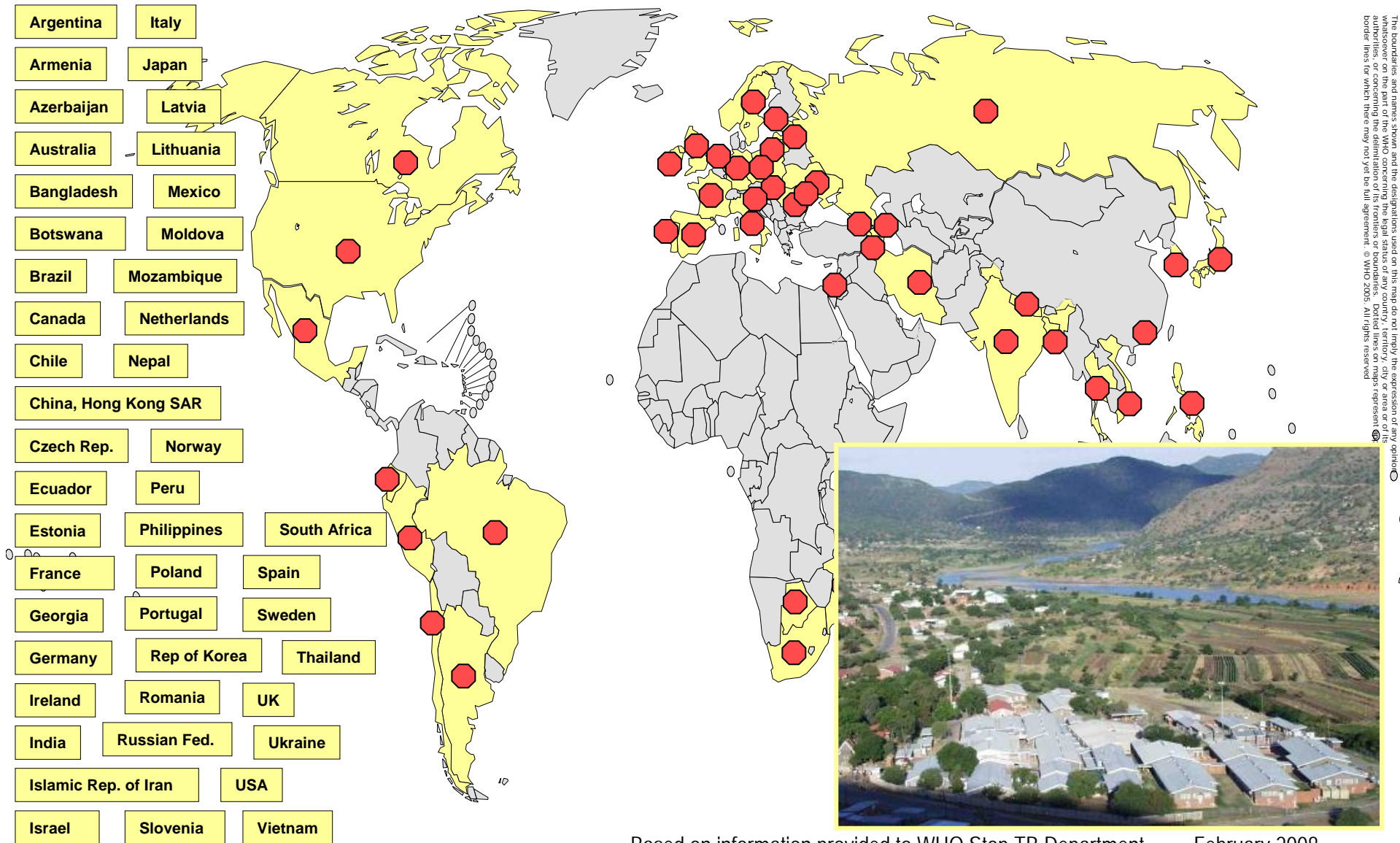
(Number of Countries reporting; % of total estimated HIV+ TB patients accounted for by those Countries)

Intensified TB case finding, diagnosis of TB and IPT provision among PLWHA, 2006



(Number of Countries reporting; % of total estimated HIV+ TB patients accounted for by those Countries)

Countries with XDR-TB confirmed Cases as of February 2008



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Based on information provided to WHO Stop TB Department - February 2008

A new vision...



New challenges require the new Stop TB Strategy

The Global Plan 2006-2015 clearly outlines what needs to be done and the costs

World Health Organization
THE STOP TB STRATEGY

VISION GOAL
A WORLD FREE OF TB
To dramatically reduce the global burden of TB by 2015 in line with the Millennium Development Goals and the Stop TB Partnership targets

OBJECTIVES

- Achieve universal access to high-quality diagnosis and patient-centred treatment
- Reduce the human suffering and socioeconomic burden associated with TB
- Protect poor and vulnerable populations from TB, TB/HIV and multidrug-resistant TB
- Support development of new tools and enable their timely and effective use

TARGETS

- MDG 6, Target 8: Halt and begin to reverse the incidence of TB by 2015
- Targets linked to the MDGs and endorsed by Stop TB Partnership
 - By 2005: detect at least 70% of new sputum smear-positive TB cases and cure at least 85% of these cases
 - By 2015: reduce prevalence of and deaths due to TB by 50% relative to 1990
 - By 2050: eliminate TB as a public health problem (<1 case per million population)

COMPONENTS OF THE STOP TB STRATEGY

- 1 PURSUE HIGH-QUALITY DOTS EXPANSION AND ENHANCEMENT**
 - a. Political commitment with increased and sustained financing
 - b. Case detection through quality-assured bacteriology
 - c. Standardized treatment with supervision and patient support
 - d. An effective drug supply and management system
 - e. Monitoring and evaluation system, and impact measurement
- 2 ADDRESS TB/HIV, MDR-TB AND OTHER CHALLENGES**
 - Implement collaborative TB/HIV activities
 - Prevent and control multidrug-resistant TB
 - Address prisoners, refugees and other high-risk groups and special situations
- 3 CONTRIBUTE TO HEALTH SYSTEM STRENGTHENING**
 - Actively participate in efforts to improve system-wide policy, human resources, financing, management, service delivery, and information systems
 - Share innovations that strengthen systems, including the Practical Approach to Lung Health (PAL)
 - Adapt innovations from other fields
- 4 ENGAGE ALL CARE PROVIDERS**
 - Public-Public, and Public-Private Mix (PPM) approaches
 - International Standards for TB Care (ISTC)
- 5 EMPOWER PEOPLE WITH TB, AND COMMUNITIES**
 - Advocacy, communication and social mobilization
 - Community participation in TB care
 - Patients' Charter for Tuberculosis Care
- 6 ENABLE AND PROMOTE RESEARCH**
 - Programme-based operational research
 - Research to develop new diagnostics, drugs and vaccines

© WHO 2006 **Stop TB Partnership**

2006-2015:
56 billion US\$
necessary to
control TB of
which 6.7 b\$
for TB/HIV

Estimated gap
3 b \$ also due
to under-
budgeting

THE GLOBAL PLAN TO STOP TB 2006-2015

Actions for Life
TOWARDS A WORLD FREE OF TUBERCULOSIS

Stop TB Partnership

Total TB control budgets in 2008 in 22 high-burden and 64 other countries vs the Global Plan

