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FACT SHEET – Updated November 2015

FAST FACTS on Tuberculosis

Tuberculosis is a preventable and curable disease caused by bacteria which spread from person to person through droplets in the air. TB usually affects the lungs, but it can also affect other parts of the body, such as the brain, the kidneys, the spine, the uterus etc. Without appropriate TB treatment, it is estimated that 43% (28-53%) of HIV-negative people with TB and 78% (65-94%) of people with TB/HIV would die.

About one-third of the world's population has latent TB, which means they have been infected by TB bacteria, but are not ill with disease and cannot pass TB onto others. However, 10% of these people will become sick with TB and can spread the disease to others during their lifetime.

2014 TB Burden

- An estimated 9.6 million people fell ill with TB in 2014: 5.4 million among men, 3.2 million among women and 1.0 million among children.
- 1.5 million people died from TB in 2014 over 4,100 deaths every day.
- TB is now the leading infectious cause of death worldwide.
- 390,000 TB deaths were among people co-infected with HIV/AIDS, making TB the leading cause of death among people with HIV/AIDS.
- The majority of the TB burden and TB deaths are in middle income countries.

	People	TB Deaths
	developing TB	
Low Income	1.7 million	370,000
Lower-Middle Income	5.7 million	906,000
Upper-Middle Income	2.0 million	202,000
High Income	0.3 million	28,000
Global Total	9.6 million	1.5 million

- An estimated 480,000 people developed multidrug-resistant TB in 2014 and an estimated 190,000 died from MDR-TB.
- Less than a quarter of people who developed MDR-TB in 2014 started on appropriate treatment and only 50% of those started on MDR-TB treatment were successful treated.
- Approximately 3.3 million people with TB are currently missed by health systems and there is an urgent need to find them.

Achievements

- Between 2000 and 2014, an estimated 43 million lives have been saved through TB diagnosis and treatment This is a significant achievement
- Yet, the number of people falling ill with TB is declining very slowly, at 1.5% per year, and is just 18% lower than the level of 2000.
- However, TB deaths have fallen by 47% since 1990.

Risk factors

- All age groups are at risk of developing TB.
- People with HIV are 26-31 times more likely to develop TB than persons without HIV.
- Infants and young children are more susceptible to contracting more severe forms of TB, such as meningitis.
- People with diabetes are 3 times more likely to develop TB than person without diabetes.
- Tobacco use greatly increases the risk of TB disease and death. More than 20% of TB cases worldwide are attributable to smoking.
- People in dusty environment, especially those exposed to silica dust, such as in the mining industry, are at increased risk of developing TB.
- People who are malnourished, or live in overcrowded settings such as in urban slums and prisons are at increased risk of TB.

Symptoms and diagnosis

Common symptoms of active lung TB are cough with phlegm/sputum and blood at times, chest pains, weakness, weight loss, fever and night sweats.

- Tuberculosis is particularly difficult to diagnose in children.
- Many countries still rely on a long-used method called smear microscopy to diagnose TB. Trained laboratory technicians look at phlegm/sputum samples under a microscope to see if TB bacteria are present. This process takes between one and four days to confirm an infection. Modern prevalence surveys have shown that using mobile chest x-ray in communities can identify many people without TB symptoms who should be tested for TB.
- Diagnosing drug-resistant and HIV-associated TB can be more complex. A new two-hour test that has proven highly effective in diagnosing TB and its drug resistant forms is now being rolled-out in many countries.

Treatment

- TB is treatable and curable in just 6 months.
- Active, drug-sensitive TB disease is treated with a six-month cocktail of four antimicrobial drugs
- The vast majority of TB cases can be cured when medicines are provided, taken properly and are quality assured.

TB and HIV co-infection

- TB is the leading cause of death among people living with HIV. One in three HIV-related deaths is caused by TB. Untreated TB in people with HIV can lead to death in weeks.
- At least one-third of people living with HIV/AIDS worldwide are co-infected with TB. Around 74% of co-infected patients live in the African region.
- People living with HIV and infected with TB are 20-30 times more likely to develop active TB disease than people without HIV.
- The dual stigma associated with TB and HIV, often along with discrimination in health care settings, make it difficult for people to seek and receive effective diagnosis and treatment. This is particularly the case among high risk groups, such as people who inject drugs or people with a history of incarceration.

Drug-resistant TB

- Anti-TB drug resistance is a major public health problem that threatens progress made in TB care and control worldwide.
- Drug-resistant tuberculosis is a form of TB caused by bacteria that do not respond to, at least, isoniazid and rifampicin, the two most powerful, first-line (or standard) anti-TB drugs.
- The primary cause of drug-resistant TB is poor case management, nonadherence to the prescribed regimen, a poor national programme, or some combination of these three. Inappropriate or incorrect use of anti-TB drugs, or use of poor quality medicines, can all cause drug resistance.
- Today, treatment for drug-resistant TB can take up to two years, is extremely complex and expensive and leads to horrible side effects such as vomiting, deafness, blindness, psychological depression and fatigue.
- A few drugs are reserved for use when standard treatments fail to cure patients.
- About 480,000 people developed drug-resistant TB in the world in 2014.
- About 190,000 drug-resistant TB deaths are estimated to have occurred in 2014.

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