

JOIN US

PREVENTING TB TO END TB

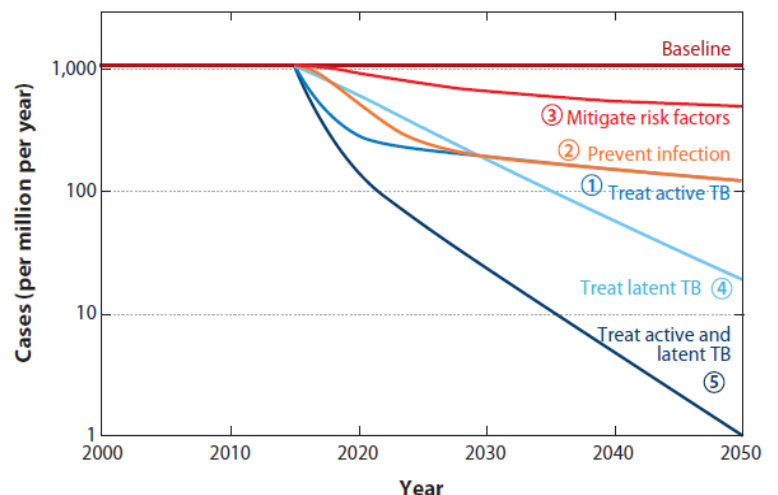
September 26, 2018 | 6:30-8:30 p.m. | Grand Hyatt, NY
Held during the United Nations General Assembly

The U.S. Centers for Disease Control and Prevention and the CDC Foundation are sponsoring this unofficial side event on the importance of TB Preventive Treatment (TPT) to coincide with the United Nations General Assembly High Level Meeting on Tuberculosis (TB) with co-hosts including the U.S. Agency for International Development and the U.S. National Institutes of Health. Esteemed panelists and speakers will be joining from UN Member States, the U.S. Government, Civil Society, and Multilateral Organizations to discuss commitments needed to scale-up TPT and other efforts to End TB.

TB is the world's deadliest infectious disease, claiming 1.7 million lives among the 10.4 million people who become ill with active TB each year. A staggering two billion people – one fourth of the world's population – are infected with latent TB. These two billion people are at risk of developing active TB disease which can be transmitted to others. Treating latent TB through TPT can prevent disease and break the cycle of transmission. However, despite the endorsement of the World Health Organization (WHO) and extensive scientific evidence and program experience that TPT is safe and effective, implementation of this intervention remains limited. Fewer than 20 percent of those considered highest priority for receiving TPT – people living with HIV and young children exposed to TB – were treated in 2016.

The WHO's END TB strategy outlines ambitious targets to reduce TB incidence by 90% and TB deaths by 95% by 2035. Ending the TB epidemic in our lifetime will require more than stepping up efforts to find and treat TB disease. It will also require substantial scale up of TPT to prevent future cases and break the cycle of transmission. Not only is investing in TPT critical to achieving the ambitious End TB targets, it also makes financial sense. TPT saves money. Preventing a case of TB by treating with TPT is cheaper than the four-drug regimen required to treat a case of TB. Further, preventing one case of TB disease prevents up to 10 to 15 additional infections, ensuring an even greater return on investment. The availability of newer, shorter TPT regimens holds promise for allowing more people to access this high-impact intervention.

A Comprehensive Epidemic Response is Required to End TB: Treating Latent TB through TPT is a Critical Component



This 90 minute session is organized in a moderated panel format followed by prepared remarks. Representatives from UN Member States from high and low TB incidence countries will engage in a discussion of progress, challenges and future plans for implementation of TPT as part of comprehensive national TB programs. The session will then feature voices from U.S. Government, Civil Society, and Multilateral Organizations discussing their efforts to support and scale-up TPT. *Please RSVP to Melissa Moore at apo3@cdc.gov or 404-639-8557 by September 14, 2018*

SPONSORS

U.S. Centers for Disease Control and Prevention

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CO-HOSTS

U.S. National Institutes of Health

U.S. Agency for International Development

PARTICIPATING ORGANIZATIONS

The Global Fund to Fight AIDS, Tuberculosis and Malaria

Stop TB Partnership

TB Proof

Unitaid

U.S. Department of Health and Human Services

U.S. Department of State, Office of the Global AIDS Coordinator

World Health Organization