Thank you Ms Boldrini…

President Obasanjo, Chancellor Brown, Mr Gates, ladies and gentlemen,

It is very fitting to launch the Global Plan to Stop TB for 2006 to 2015 here in Davos, very famous today as the venue of the World Economic Forum but very famous historically for its TB sanatorium, the setting of the Magic Mountain by Thomas Mann. This is a truly momentous occasion. Eight years ago, when I first joined the TB programme of WHO, such prominence for what was then a highly neglected disease was unimaginable -- and is now most welcome. On behalf of the Stop TB Partnership, a global movement of more than 400 partners that is housed by WHO, let me therefore begin by expressing our profound appreciation to our distinguished speakers and all of you.

The Global Plan represents *Actions for Life - Towards a World Free of TB*. This Global Plan sets out clearly the actions needed to achieve the global targets for TB control and at what cost. The actions planned over the next 10 years build on a very solid track record of achievements.

For example, the first Global Plan that covered the past five years achieved nearly all of its objectives, and within budgetary projections. We said we would
raise and spend $6 billion on TB treatment and we did so. Under the leadership of WHO, we completed expansion of the highly effective DOTS strategy against TB to 192 countries covering 90 percent of the world’s population. We more than doubled the number of people treated under DOTS, to over 4 million per year. We achieved a global DOTS cure rate of 83 percent, against a target of 85. And we more than doubled the detection rate of TB cases by DOTS programmes to 60 percent, against a global target of 70.

We have laid the foundations to address the twin threats drug-resistant TB and HIV-related TB.

Taken together, all of these measures have reduced TB prevalence and death rates in the past 5 years, and saved millions of lives.

At the same time, the first Global Plan dramatically accelerated research and development for new tools that are badly needed to fight TB. As a result we now have 27 new TB drug candidates in the pipeline, 15 new diagnostics under development, and five new vaccines in phase I trials. This is a remarkable achievement, and as these new tools become available in the field during the next ten years they will revolutionize how we fight tuberculosis.
For these reasons, we are fully confident that the new Global Plan to Stop TB will succeed as well. It represents a consensus view of what can be achieved by 2015 in TB-affected countries, provided the necessary resources for full implementation are mobilized. The Plan provides a clear global strategic direction, it details TB control activities across 8 epidemiological regions of the world, and the actions for which the Partnership's Working Groups are responsible.

The core actions of the Plan can be encapsulated in two areas: implementation of current cost-effective interventions at country level, and research and development for new drugs, diagnostics and vaccines. What will this new Global Plan achieve by 2015 if fully funded and implemented?

- We will treat 50 million people with TB, cure 90% of them and save the lives of an additional 14 million people -- the vast majority of them working adults in low income countries.

- We will put 3 million TB patients co-infected with HIV onto antiretrovirals by testing and counselling for HIV in national TB programmes.

- We will end the death sentence imposed by multidrug-resistant TB by massively scaling up treatment to nearly a million patients over 10 years.

- We will deliver the first new TB drug in 40 years by 2010, which will shorten treatment and help reduce the spread of drug resistance.

- We will deliver a new point-of-service diagnostic by 2010, which will be fast, affordable and effective in detecting TB infection in HIV+ people.

- We will deliver by 2015 the first new TB vaccine since the early 1900s,
Finally, in achieving these objectives we will *meet* the Millennium Development Goal of halting and reversing the TB epidemic by 2015. We will also meet the impact targets set by the Stop TB Partnership of cutting TB prevalence and deaths in half relative to 1990 levels.

In summary, with this Plan, these powerful new tools, and the resources to do the job, *we will break the back of the global TB epidemic* and create the conditions to eliminate tuberculosis as a public health problem by 2050.

The Global Plan for 2006 to 2015 calls for US$56 billion over the next 10 years, representing a *three-fold increase* in annual funding levels in the First Global Plan. Of this amount, US$47 billion is for implementation of interventions at country level and $9 billion is investment in research and development for new drugs, diagnostics and vaccines. Extrapolating from current funding levels, the total estimated gap over ten years is US$31 billion.

Ladies and gentlemen we have the possibility to finally defeat Tuberculosis during the next few decades -- a bacillus that has afflicted humankind since at least the days of the Pharaohs, and is thought to have killed a billion people. Now is the time, here is the Plan, this is our chance. Thank you.