

Reaching the targets for TB control: call for papers

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Tuberculosis (TB) has been a major killer disease for several thousand years. Despite intensive efforts to combat the disease over the past twenty years, TB remains one of the leading causes of morbidity and mortality in many settings, particularly in the world's poorest countries. TB is primarily a disease of poverty, but is a significant public health problem also in wealthier countries where pockets of poverty and marginalized population groups exist. It is estimated that around 1.7 million people die each year from TB; and in 2004 figures indicate that approximately 8.9 million people developed the disease.

In 1991, the World Health Assembly recognized TB to be a major neglected health problem and called for much greater international efforts to control it, setting two global targets — a TB case detection rate of 70% and a treatment success of 85% among detected cases. These targets were originally planned to be achieved by 2000. However, the World Health Assembly acknowledged that more time was needed and deferred the achievement date to 2005. Since 1995, data on progress towards achieving the TB targets have been collected and evaluated, and in May 2007 WHO will present a final report on this to the World Health Assembly. To mark this milestone, the *Bulletin* is planning to publish a special theme issue in May 2007 entitled “*Reaching the targets for TB control: lessons learned.*”

Over the period 1991–2005, enormous changes have occurred in the public health and social environment within which TB control is carried out. Many countries with a high TB burden have also had to face the advance of the HIV/AIDS pandemic, with its detrimental effect on the TB epidemic. The emergence and spread of multi-drug-resistant TB (MDR-TB) has been an additional constraint in an increasing number of countries, where treatment of TB has become more difficult and costly. Furthermore, growing inequities in some of the poorest countries have created barriers to the provision of health

services and have impeded TB control measures for the most vulnerable population groups. Against this background, progress in global TB control requires special efforts, often far beyond those envisaged when the targets were originally agreed upon.

The special theme issue of the *Bulletin* is intended to generate debate on key issues about the targets and how they were set, the strategic approaches adopted, and assessment of the progress towards achieving both them and the TB-related Millennium Development Goals (MDG), set for 2015. Through a series of commissioned articles, it is planned to review some of the situations where successes have been documented and others where barriers have impeded progress, and to consider the main reasons underlying both these situations. For example, factors contributing to success are expected to include innovative strategies that benefit from national health system reforms, improved availability of anti-TB drugs and application of information technology. In contrast, negative factors may include difficulties at the health system level, the impact of TB/HIV and MDR-TB, special situations such as complex emergencies and other disasters. The viewpoint will be global but the focus will be on those countries with the highest TB burden. WHO's new Stop TB Strategy and the Stop TB Partnership's Global Plan to Stop TB (2006–2015) will also be discussed.

Assessment of these diverse aspects of more than a decade of efforts for TB control at the global, regional, national and local levels will inform future work and set the scene for what needs to be done towards meeting the 2015 MDG TB-related control targets and objective of eliminating TB as a significant public health problem by 2050. The theme issue will be an important reference point in international efforts to control TB.

To complement several articles that have already been commissioned, the *Bulletin* welcomes submissions on relevant research and policy and practice

papers from national TB programmes, academic institutions, and community and patient groups. We are particularly interested in receiving contributions dealing with regional and country-level progress and constraints; the reasons for, and barriers to, improved case-finding and treatment success rates; examples of the inter-relationship between programmatic efforts to improve TB control and the enhancing of the overall health system; and lessons learned for the next decade of TB control. All contributions, whether commissioned or independently submitted, will be peer reviewed according to the *Bulletin*'s standard practice.

Manuscripts should be submitted to <http://submit.bwho.org> by 1 November 2006, respecting the Guidelines for Contributors, accompanied by a cover letter mentioning this call for papers. ■

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