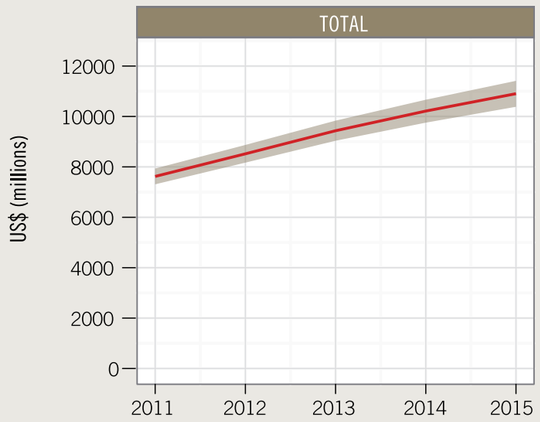
SUMMARY OF ESTIMATED FUNDING REQUIRED TO IMPLEMENT THE GLOBAL PLAN TO STOP TB 2011–2015

PLAN COMPONENT	TOTAL FUNDING REQUIRED, US$ BILLIONS (% TOTAL)
Implementation	**36.9 (79%)**
DOTS (TB care)	22.6 (48%)
Drug-resistant TB	7.1 (15%)
TB/HIV	2.8 (6%)
Laboratory strengthening	4.0 (8%)
Technical assistance	0.4 (1%)
Research and Development	**9.8 (21%)**
Fundamental research	2.1 (5%)
New diagnostics	1.7 (4%)
New drugs	3.7 (8%)
New vaccines	1.9 (4%)
Operational research	0.4 (1%)
All components	**46.7 (100%)**

The projected funding gap for meeting all the goals and targets of the *Global Plan to Stop TB 2011-2015* is US$ 21 billion.

TOTAL FUNDING REQUIREMENTS



Stop TB Partnership

World Health Organization

THE GLOBAL PLAN TO STOP TB 2011–2015

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THE GLOBAL PLAN TO STOP TB 2011–2015

Transforming the Fight

TOWARDS ELIMINATION OF TUBERCULOSIS

FAST FACTS

WHY A NEW GLOBAL PLAN TO STOP TB?

In 2006 the Stop TB Partnership launched the *Global Plan to Stop TB 2006-2015*, whose goals were twofold:

- reach the UN Millennium Development Goal of halting and beginning to reverse the epidemic by 2015
- halve TB prevalence and death rates by 2015, compared with 1990 levels.

The Partnership recognized in 2010 that there was a need to produce an updated plan that would take into account progress made since 2006 and changes in TB policy and epidemiology.

EXPECTED ACHIEVEMENTS IN TB CARE, 2011-2015

PLAN COMPONENT	BEST ESTIMATE IN MILLIONS
Laboratory strengthening	
People with drug-susceptible TB diagnosed, notified and treated	32.5
People with drug-susceptible TB successfully treated	27.9
Drug-resistant TB/laboratory strengthening	
Previously treated TB patients tested for MDR-TB*	4.5
New TB patients tested for MDR-TB	2.6
Cases of MDR-TB treated according to international guidelines	1.1
Cases of MDR-TB successfully treated	0.8
TB/HIV/laboratory strengthening	
TB patients tested for HIV	29.9
HIV-positive TB patients enrolled on cotrimoxazole	4.1
HIV-positive TB patients enrolled on antiretroviral treatment	4.0
People living with HIV screened for TB at last visit to HIV care services	71.1

* multidrug-resistant tuberculosis

WHAT'S THE SAME AND WHAT'S NEW IN THE *GLOBAL PLAN TO STOP TB 2011–2015*?

What is the same?

- **Focus on 2015 targets.**
- **Calculation of financial requirements for both TB care and research and development up to 2015**
- **A guide for planning within countries**
- **Focus on low- and middle-income countries**
- **Structured according to the working groups of the Stop TB Partnership**

What is new?

- **Laboratory strengthening** - included as a major component
- **Fundamental research and operational research** - goals and targets included
- **Strategic frameworks to set out each major component of the plan in a clear and consistent format**
- **Up-to-date epidemiological projections**
- **Updated targets for TB care and for research and development**
- **Updated funding requirements**

Download the complete *Global Plan to Stop TB 2011-2015* at:

www.stoptb.org

TB IN THE WORLD: ANNUAL IMPACT

- Each year, a total of **9 million** new cases
- More than **1 million cases** among people living with HIV
- **Half a million cases** of MDR-TB
- Nearly **2 million deaths**

2010 STATUS: ACHIEVEMENTS OF THE *GLOBAL PLAN TO STOP TB 2006-2015*

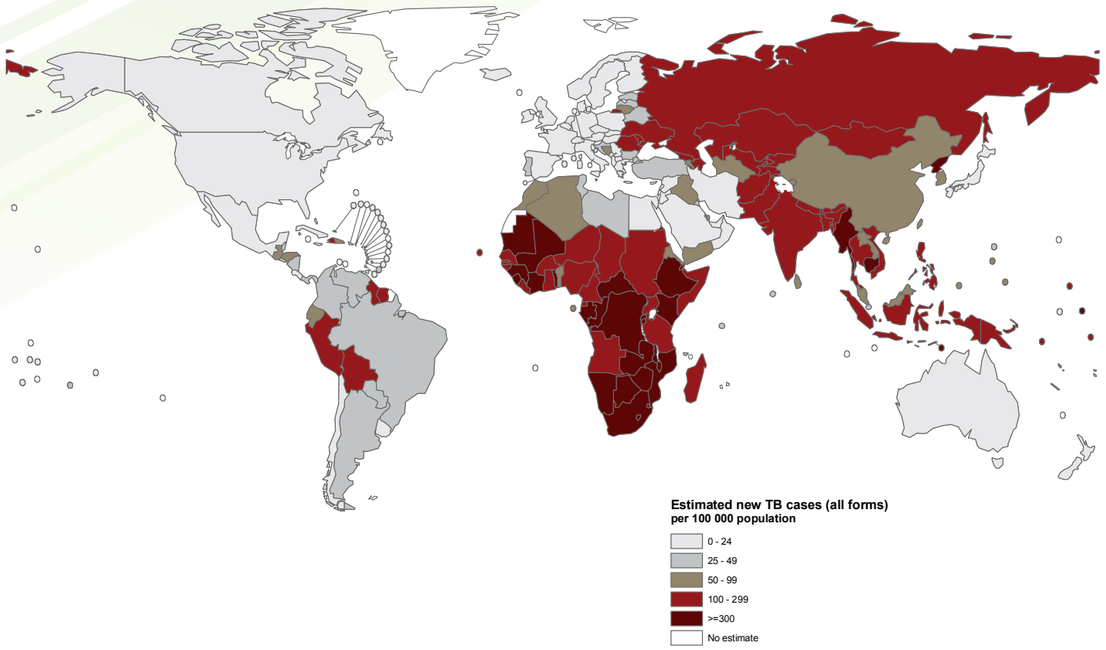
- Incidence declining slowly since peak in 2004
- **86% treatment success** rate using WHO-recommended approach
- Death rate declining since 2000
- **Stop TB Partnership target to halve death rate by 2015** compared to 1990 levels on track in Asia, the Americas and the Eastern Mediterranean

COST OF INACTION

Without dramatic increases in funding and political commitment between 2010 and 2015:

- **Over 50 million people** will develop active TB
- **Over 10 million lives** will be lost to this preventable, curable disease; 4 million of them will be women and children
- **Millions of children** will be orphaned needlessly
- **Over 2 million cases** of MDR-TB will emerge for want of proper care

ESTIMATED TB INCIDENCE BY COUNTRY, 2009



SUMMARY OF MAIN IMPLEMENTATION TARGETS

PLAN COMPONENT AND INDICATORS	BASELINE 2009	TARGET 2015
DOTS/Laboratory strengthening		
Number of cases diagnosed, notified and treated according to the DOTS approach (per year)	5.8 million	6.9 million
Treatment success rate (in annual cohort)	86%	90%
Number of countries with ≥1 laboratory with sputum smear microscopy services per 100 000 population	≥75	149
Percentage of laboratories providing sputum smear microscopy services that are using LED microscopes for diagnosis of smear-positive TB	<1%	20%
Drug-resistant TB/Laboratory strengthening		
Percentage of previously treated TB patients tested for MDR-TB	7%	100%
Percentage of new TB patients tested for MDR-TB	7%	20%
Number of countries among the 22 high burden countries (HBCs) and 27 high MDR-TB burden countries with ≥1 culture laboratory per 5 million population	18–21	36
Percentage of confirmed cases of MDR-TB enrolled on treatment according to international guidelines	36%	100%
Number of confirmed cases of MDR-TB enrolled on treatment according to international guidelines	11 000	~270 000
Treatment success rate among confirmed cases of MDR-TB	60%	≥75%
TB/HIV/Laboratory strengthening		
Percentage of acid-fast bacilli (AFB) smear-negative, newly notified TB cases screened using culture and/or molecular-based test	<1%	≥50%
Percentage of TB patients tested for HIV	26%	100%
Percentage of HIV-positive TB patients treated with co-trimoxazole therapy (CPT)	75%	100%
Percentage of HIV-positive TB patients treated with antriretroviral therapy (ART)	37%	100%
Percentage of people living with HIV attending HIV care services who were screened for TB at their last visit	~25%	100%
Percentage of people living with HIV attending HIV care services who were enrolled on isoniazid preventive treatment (IPT), among those eligible	<1%	100%
Laboratory strengthening (additional to those above)		
Percentage of national reference laboratories implementing a quality management system according to international standards	<5%	≥50%

SUMMARY OF MAIN RESEARCH AND DEVELOPMENT TARGETS

PLAN COMPONENT AND INDICATORS	BASELINE 2010	TARGET 2015
Fundamental research		
New funding for fundamental research, per year (US$ millions)	98	450
New diagnostics		
Number of new tests for the diagnosis of active TB that can be used in district laboratories	1	2
Number of new tests for the diagnosis of active TB in peripheral-level laboratories	1	2
Number of new point-of-care tests for the diagnosis of active TB in peripheral-level health centres	0	2
Number of new tests for the diagnosis of drug-resistant TB in district laboratories	0	2
Number of new tests for the diagnosis of drug-resistant TB in peripheral-level laboratories	0	1
Number of new tests for the diagnosis of drug-resistant TB in health centres	0	1
New drugs		
Number of new and/or repurposed drugs in Phase I trials	3	21
Number of single or combination Phase II trials investigating new and/or repurposed drugs	6	34
Number of new regimens for drug-susceptible TB in Phase III trials	2	3
Number of new regimens for drug-resistant TB in Phase III trials	0	2
Duration of treatment of latent TB infection	4-6 months	2-3 months
New vaccines		
Number of vaccine candidates that have entered Phase I trials	5	20
Number of vaccine candidates that have entered Phase II trials	2	9
Number of vaccine candidates that have entered Phase IIb trials	2	3
Number of vaccine candidates that have entered Phase III trials	1	4
Operational research		
New funding for operational research, per year (US$ millions)	35	86