

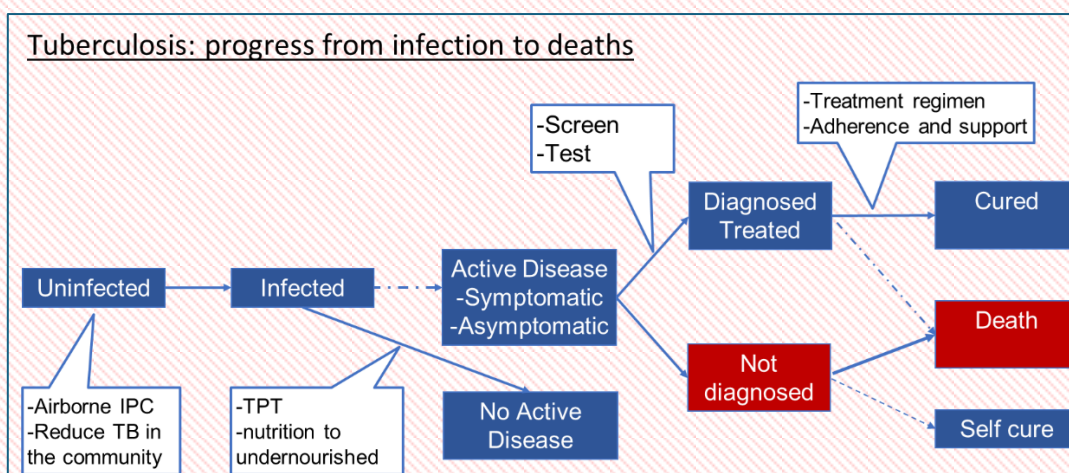
## Life-saving services in TB response

Tuberculosis (TB) is a potentially fatal disease with airborne transmission and drug-resistant variants. TB kills more people than any other infectious disease. In 2023, 1.25 million people died due to TB worldwide, including 191,000 children.<sup>1</sup> Most people who die of TB remain untreated as about 3 million people are missed by TB programs every year. Undiagnosed and untreated TB has a mortality rate of about 50%, and one such individual can infect up to 15 people in a year.<sup>2</sup> However, early diagnosis and effective treatment leads to cure in more than 90% of individuals. Untreated drug-resistant TB has even a higher mortality but it can be diagnosed, treated and cured.

All activities for TB prevention, diagnosis and treatment save lives. These activities can be grouped into three categories:

1. Activities that save the lives of sick people through prompt diagnosis and effective treatment.
  - TB screening and testing equipment and reagents, including for diagnosis of drug-resistant TB
  - Laboratory and X-ray services, including specimen transport
  - Medical services for diagnosis of all forms of TB in adults and children
  - Medicines for treatment of TB and drug-resistant TB
  - Treatment adherence and support services to ensure treatment completion and cure
2. Activities that save lives by preventing TB infection from progressing into TB disease
  - Contact tracing and TB Preventive Treatment of contacts of people with TB
  - TB Preventive Treatment for People Living with HIV and other groups at increased risk of TB
3. Activities that improve access / remove barriers to TB care and prevention services
  - TB screening at health facilities and communities to identify TB among populations with high burdens of TB and limited access to care.
  - Activities that reduce socio-economic barriers to access lifesaving care
  - Community supported/led TB prevention, diagnosis, treatment and monitoring services

Human resources, procurement and supply chain, capacity building and technical support for program implementation and M&E needed to ensure that these activities happen should also be considered as part of lifesaving services.



<sup>1</sup> [Global tuberculosis report 2024](#). Geneva: World Health Organization; 2024.

<sup>2</sup> E.W. Tiemersma, M.J. van der Werf, M.W. Borgdorff, B.G. Williams, N.J. Nagelkerke. Natural history of tuberculosis: duration and fatality of untreated pulmonary tuberculosis in HIV negative patients: a systematic review. PLOS One, 6 (4) (2011), Article e17601