Can we end global Tuberculosis epidemic by 2030?
Thursday 6 April, 1330 - 1530, Plenary Hall 3

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Tuberculosis (TB) is a curable disease but remains the leading infectious disease killer in the world with 1.5 million lives lost in 2014. In addition to the human cost, TB has extraordinary social and economic impacts. The Sustainable Development Goals (SDGs) aim to end TB related deaths, transmission and catastrophic costs by 2030. In 2015, the World Health Organisation (WHO) launched the END-TB strategy, a transformative and unified response to ending TB deaths, disease, and suffering. This consists of 3 pillars: (1) Integrated, patient centred care and prevention (2) Bold policies and supportive systems (3) Intensified research and innovation. Optimal implementation of current tools and strategies to achieve 90-90-90 targets for TB (i.e., 90% of vulnerable populations screened, 90% diagnosed and started on treatment, and at least 90% cured) will make significant progress towards reducing TB transmission and deaths.

However, the ambitious goal of ending the global TB epidemic will not be realized without new models of service delivery, a new vaccine, novel diagnostics, new treatments, coupled with multi-sectorial action to address the socio-economic drivers and breaking down stigma to place the affected community at the forefront of the response. Research and innovation (including basic and operational/implementation research) is critical to break the trajectory of the epidemic and reach the global targets.
The emergence and spread of drug-resistant TB (DR-TB) is a growing global public health crisis requiring urgency, visionary political leadership and bold investments. A recently commissioned UK Government report has projected that in 2050, drug-resistant microbes will kill more people than cancer and DR-TB was listed among the top 3 of these diseases. Responding to DR-TB requires functioning health systems and is more complex, challenging and costly than responding the drug-sensitive form. Drug-resistance emerges in populations served by weak health systems, spreads and poses a threat to regional and global health security. It is in these poor and vulnerable populations where bold policies and innovative approaches are most needed.