

TUBERCULOSIS: A GLOBAL PRIORITY FOR RESEARCH AND DEVELOPMENT

FIVE REASONS WHY



Tuberculosis (TB) is the number one global infectious disease killer today, causing 1.8 million deaths per year. Drug-resistant TB is the most common and lethal airborne AMR disease worldwide today, responsible for 250 000 deaths each year.



Patients with multidrug-resistant TB (MDR-TB¹) need complex and prolonged multidrug treatment with costly, highly toxic, and much less effective second-line medicines. There is a limited number of second-line medicines to treat MDR-TB and only 52% of patients are successfully treated globally.



In about 50% of MDR-TB patients worldwide, treatment regimens are already compromised by second-line drug resistance. Treatment of extensively drug-resistant disease (XDR-TB²) is successful in only one in three patients at best.



Patients with M/XDR-TB face agonising, prolonged suffering and often permanent disability while on treatment, compounded by devastating economic hardship, stigma and discrimination.

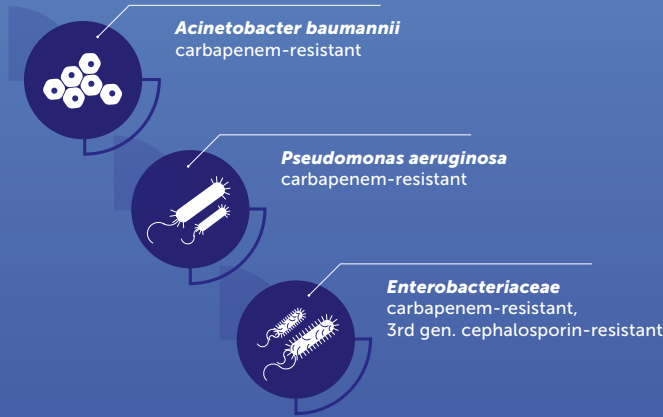


Only two new antibiotics for treatment of MDR-TB have reached the market in over 70 years. R&D investment in TB – seriously underfunded – is at its lowest level since 2008.

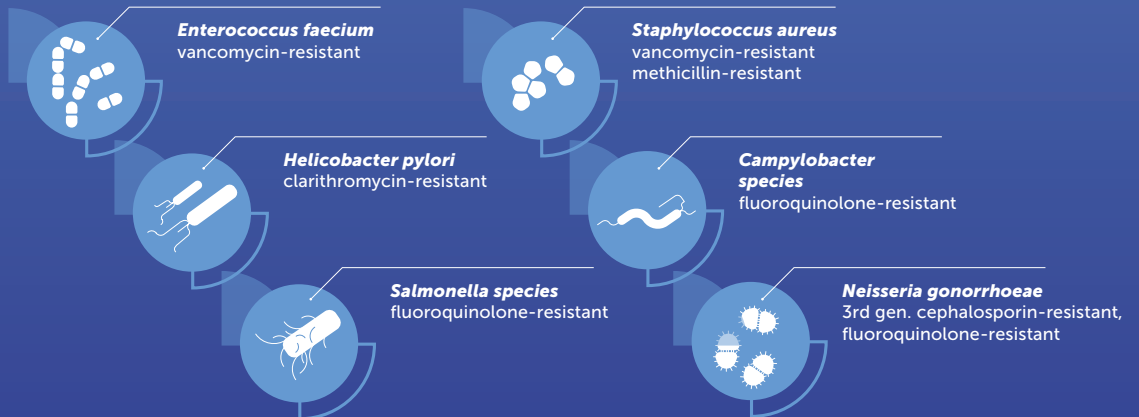
¹ MDR-TB – multidrug-resistant tuberculosis, that does not respond to at least isoniazid and rifampicin, the two most powerful first-line anti-TB medicines.
² XDR-TB – extensively drug-resistant tuberculosis, defined as MDR-TB plus resistance to fluoroquinolones and injectable second-line anti-TB medicines.

OTHER PRIORITY PATHOGENS

CRITICAL PRIORITY



HIGH PRIORITY



MEDIUM PRIORITY

