

We have carried
Tuberculosis for far too
long, a disease which
has been around for
generations and still
kills more than 4,000
people per day.

We've known how to treat and prevent TB for over 70 years, yet around 10 million people fall ill from the disease every year. Tuberculosis (TB) is the world's deadliest infectious disease and takes its greatest toll on the poor.

Latent TB infection: A breeding ground for developing TB disease

TB can lie dormant for decades before it strikes; this is called "latent TB infection". Almost a quarter of the globe is infected with latent TB. People with latent infection have no symptoms, are not contagious and most of them don't know they are infected. But they are at risk of developing active TB at some point in their life. Without treatment, 5 to 10 percent of infected people—or between 85 to 170 million people—will develop active TB, some specific groups are more susceptible than others.

People living with HIV—who are 20 to 37 times more likely to move from latent infection to active TB—are dying from TB in large numbers.

Children are also at high risk of dying from TB, and children up to five years of age have the highest risk of progression from latent infection to active TB. In high burden settings, children represent up to 10 percent of all TB patients.

Our current approach to ending TB is failing. WHO estimates that at least 30 million people will be eligible for TB preventive treatment between 2018 and 2022. We can do better and we can do more. It's time to shift the focus from just treatment to prevention, because the only road to TB elimination will require forging a stronger approach to prevention.

TB Preventative Therapy (TPT)

Treatment of latent infection is referred to as TB preventive therapy (TPT) and is one of the most powerful ways to prevent TB. If left untreated, latent infection can develop into active TB, the form of TB that makes people sick and is capable of being transmitted from one person to another.

TB preventive therapy has two major goals:



Prevent people who are already infected with the TB bacterium from falling ill with active TB



Protect people who are uninfected but at risk of TB exposure from getting infected in the first place

Preventive therapy is one of the best ways to keep individuals and families safe from becoming sick with TB, which in turn helps communities become—and remain—TB free.

Countries to be targeted with short-course preventive therapy under UNITAID



Ghana

Zimbabwe

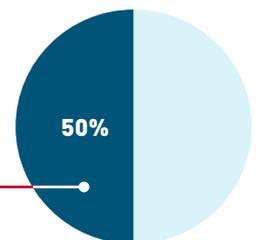
Stopping TB in its tracks by getting one step ahead of TB

IMPAACT4TB is a four-year project introducing a comprehensive way to tackle latent TB infection—the seed bed of TB—in order to slow and ultimately stop the flood of new TB cases occurring every year. We're doing this by identifying and providing new, shorter treatment options for people with latent TB infection. The project will prioritize short-course TB preventive therapy for people living with HIV and children under five, and subsequently all those in close contact with TB patients in 12 high-burden countries—who represent 50 percent of the global TB burden.

By treating latent TB infection, we can prevent thousands of people from developing TB disease—and ultimately save lives.

Treatment for latent TB infection has been available since the 1960s, yet very few people who are eligible for TB preventive therapy are receiving it. Current treatment options are long—with people required to take a pill daily for 6 to 36 months. Even among those who start treatment, many fail to complete the full course.

Of the 30 high TB/HIV burden countries, half reported providing TB preventive treatment to people newly enrolled in HIV care in 2017, up from 11 in 2016.





Our approach to preventing TB



Creating demand for short-course preventive therapy



Securing supply of effective treatment regimens



Reducing the price of rifapentine to ensure equitable access



Enhancing uptake in high-burden countries



Generating evidence to inform policies and programs

Short-course TB preventive therapies are a potential game-changer

Evidence shows that short-course TB preventive therapies are as effective as the current treatment of choice in preventing progression to active disease. People taking shorter drug regimens are up to three times more likely to complete their course of latent TB infection therapy than those on longer regimens—leading to better outcomes and more lives saved.

3HP is a short-course TB preventive therapy regimen that combines two TB drugs—isoniazid and rifapentine—weekly for three months. The regimen is easier for patients to take and has fewer side effects. The World Health Organization (WHO) recently released consolidated guidelines for the treatment of latent TB infection that recommends the use of 3HP for people living with HIV and contacts of TB patients of any age.

The advantages of 3HP



Shorter—
3 months weekly
vs. 6 months daily



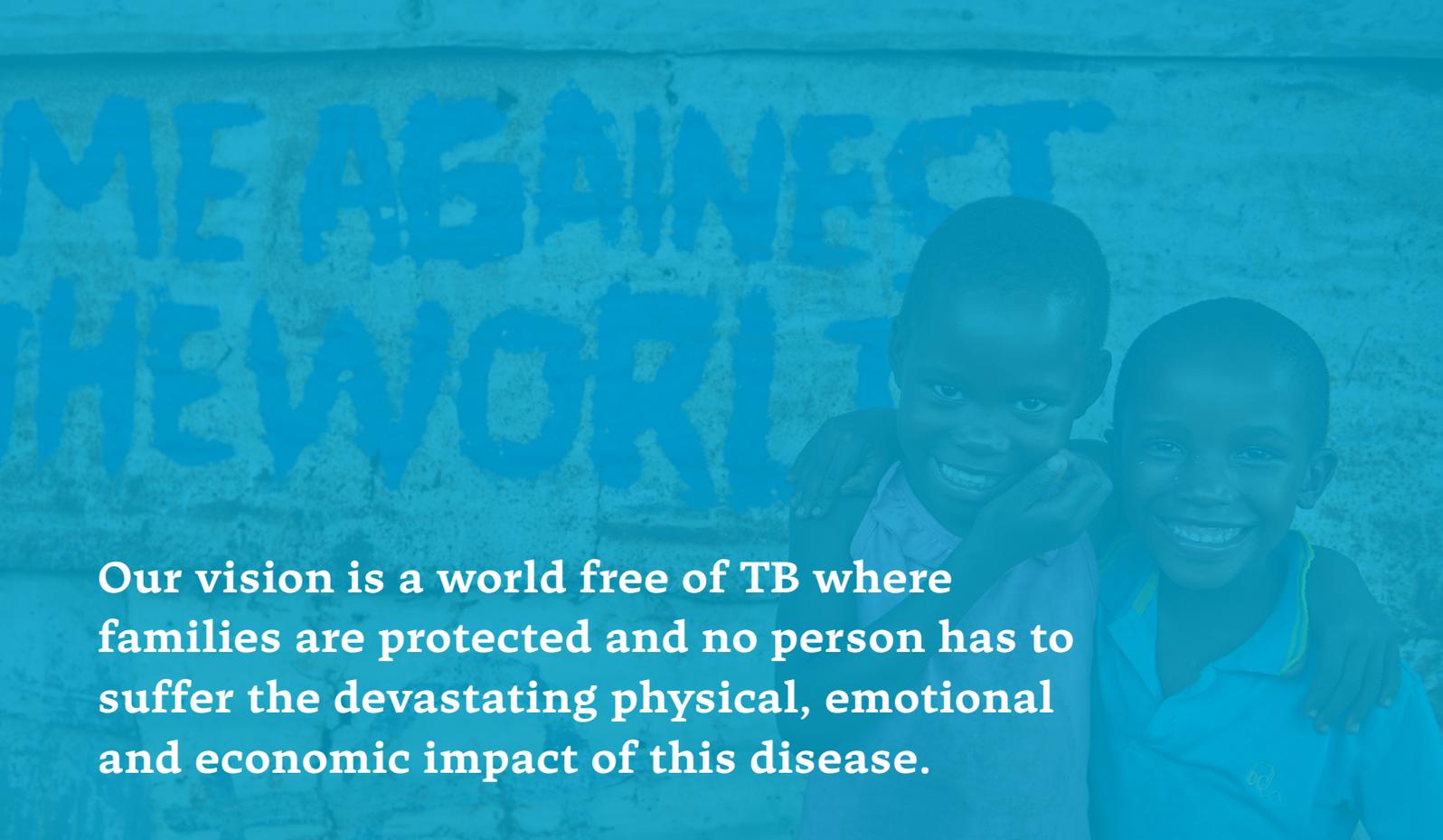
Less toxic



Fewer
side effects



Greater
adherence



Our vision is a world free of TB where families are protected and no person has to suffer the devastating physical, emotional and economic impact of this disease.

By working hand-in-hand with governments, patients, doctors, donors and drug manufacturers, the IMPAACT4TB consortium is making sure that the demand for lifesaving therapies for latent TB infection is matched by an effective and affordable supply. We are ensuring that all people at risk of TB can have equitable access to the best ways of preventing TB.

For more information, please contact:
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Through the support of



Source of data: WHO Global TB Report 2018



Consortium members



Collaborating partners



Increasing **M**arket and **P**ublic health outcomes through scaling up **A**ffordable **A**ccess models of short **C**ourse preventive therapy for **T**B