The board of UNITAID, the new drug funding mechanism, is to release an initial US$ 20 million for second line anti-TB drugs to projects approved by the Green Light Committee in mainly low-income countries. The decision will help scale up high-quality control of multidrug-resistant TB (MDR-TB) as outlined in The Global Plan to Stop TB, 2006–2015 and save the lives of many vulnerable patients infected with drug-resistant TB. Furthermore, board members have endorsed the WHO drug prequalification process to ensure that patients benefit from drugs of a high standard. They have also agreed to consider supporting the purchase of MDR-TB diagnostic kits.

USA health warnings on XDR-TB
A US health advisory group has urged the US Secretary of Health and Human Services and the Director of the Centers for Disease Control and Prevention (CDC) to seek US$ 95 million in extra funding from Congress to tackle XDR-TB in 2007. A resolution calling for the action was issued in December 2006 by the Advisory Council for the Elimination of TB, a group of national experts that advises the US Health Secretary on TB issues. “If XDR-TB is not addressed in the early stages before it becomes more prevalent in our country, it will become a Trojan horse that will set back our country’s ability to control TB for decades,” warned the group’s chair, Dr Michael Fleenor. In the early 1990s, an outbreak of MDR-TB in New York City cost more than US$1 billion to contain.

Two US Senators (Senators Brownback and Durbin) are leading calls for Congress to restore funding to go towards the fight against AIDS, TB and Malaria - a move supported by advocacy organizations calling for an additional US$ 300 million to fight XDR-TB globally and extra funds to combat drug-resistant TB and strengthen TB control in the USA.

Medicine journal highlights TB transmission in health-care settings
National TB control programmes and health agencies in lower- and middle-income countries must, as a priority, begin to address the risks of TB transmission among health care workers, says a study in the Medicine journal (26 December 2006). The authors acknowledge that the need to implement infection control measures in the wake of XDR-TB has been re-emphasized by WHO and the Stop TB Partnership, with efforts ongoing to update existing guidelines. They also highlight the need to further develop programmes suitable for resource-limited countries: “We strongly support these initiatives and call for more resources and partnerships to tackle the chronically neglected problem”.

The Lancet report: number of MDR-TB cases higher than previously estimated
A survey of 79 countries by WHO and CDC published in The Lancet (16 December 2006), found anti-TB drug resistance in every country surveyed. China, India and the Russia Federation account for more than half of all MDR-TB cases worldwide. MDR-TB, a precursor to XDR-TB, occurs when MDR-TB strains are resistant to second-line anti-TB drugs. It is estimated that 424 000 MDR-TB cases occurred annually in 2004; earlier estimates had put the number at 300 000.

XDR-TB featured in World AIDS Day messages
In his first World AIDS Day statement as UN Secretary-General Special Envoy to Stop TB, Dr Jorge Sampaio called for a “massive investment” in TB control and research. WHO Stop TB Director, Dr Mario Raviglione, said the fight against TB and XDR-TB was now the responsibility of a wide range of individuals and organizations. UNAIDS Executive Director, Dr Peter Piot, warned that “MDR-TB and XDR-TB highlight new challenges in our collective response” to HIV/AIDS. Kenyan TB/HIV advocate, Lucy Chesire, said “funding must flow readily and urgently” to combat XDR-TB.

Related planning, capacity building and investigation efforts
- WHO is developing contracts with two supranational TB reference laboratories to investigate the magnitude of XDR-TB globally, particularly in southern African countries. Second-line anti-TB drug susceptibility testing is now being incorporated into routine drug resistance surveys by supranational TB reference laboratories.
- Discussions are under way on the placement of a WHO officer in South Africa for two years to work closely with the national TB control programme on XDR-TB. South African TB control staff recently completed an MDR-TB management course, funded by Eli Lilly, at the WHO MDR-TB collaborating centre in Latvia.
- Expert missions are planned in early 2007 to assist Malawi and Swaziland to finalize their national MDR-TB and XDR-TB plans, and support strengthening of overall TB control activities.
- Next month, WHO publishes the first in a series of annual reports that will monitor progress towards universal access to HIV/AIDS prevention, treatment, care and support in areas of priority intervention for the health sector. The report will focus on progress against several indicators, including joint TB/HIV services. Ensuring all patients with HIV are adequately treated for TB and started on antiretrovirals was among the recommendations of WHO’s XDR-TB Global Task Force, which met for the first time in Geneva in October 2006.