

Joining forces to beat the new wave of tuberculosis

Why does a disease that can usually be cured with readily-available medicines continue to kill nearly two million people a year? And why is it now a growing threat even in Europe, a continent that largely eradicated the same disease over 60 years ago?

These were two of the key questions posed by participants at a major symposium on global tuberculosis control in Barcelona (Spain) last week. The event, sponsored by Sandoz, brought together experts from around the world to discuss challenges to stopping tuberculosis, which now kills one person every 15 seconds – more than either malaria or HIV / AIDS.

In 1943, when pioneer scientists Albert Schatz and Selman Waksman first identified streptomycin as a cure for tuberculosis, more than 20 000 people were dying of the disease in Great Britain alone. The only known treatment was a combination of rest, exercise, fresh air and good food.

Thirty years on, following the discovery of a potent package of first-line medicines including isoniazid, pyranzinamide, ethambutol and rifampicin (by Novartis predecessor company Ciba-Geigy), the prevailing view was that tuberculosis - along with other infectious diseases – was a problem of the past, or at least one confined to underdeveloped countries. Sadly, the victory cry was premature...

HIV-related resistance, rapidly increasing travel and migration, drug shortages in the worst-hit areas and the failure of both patients and doctors to stick to proven treatment schedules have all contributed to TB once again becoming an international health threat. One third of the world's population is now infected, although only one in ten develops the full-blown disease. If not treated, it kills more than half its victims. In 1993, the World Health Organization declared TB a global emergency, and recent years have seen the emergence of new strains, often resistant to previously effective treatments.

The good news, though, is that tuberculosis can usually be cured – and everybody can play a part in preventing it spread in the first place. The Barcelona symposium focused largely on the challenges facing global control, tuberculosis in Europe, and a range of public-private initiatives undertaken by various stakeholders.

Sandoz and Novartis are committed partners to global TB control. Over and above its involvement in key events such as the symposium and the India-based “Joint Efforts to Eradicate Tuberculosis” (JEET) project, Sandoz is a leading supplier of state-of-the-art medicines. In particular, it helps to ensure patient compliance by providing global access to fixed dose combinations (FDCs) of the four leading first-line drugs, which conform with all WHO guidelines. With modern manufacturing facilities in South Africa, Bangladesh, Egypt, Pakistan and India, Sandoz is the one of the first companies that invested in a multi-centre, multi-ethnic and multi-national clinical trial to ensure bioequivalence with the reference products.

Novartis participates actively in the global “Stop TB Partnership” by donating TB drugs free of charge to half a million patients over a five-year period, in line with WHO guidelines. The company is also playing a leading role in the search for new anti-TB drugs, through the first-of-a-kind Novartis Institute of Tropical Diseases (NITD) in Singapore. The work of the institute is based on the recognition that TB will never be eliminated without new and even more effective drugs.

Meanwhile, the Novartis Foundation for Sustainable Development works closely with the TB program in Tanzania, one of the most affected countries, to improve access to treatment. In 2006, the program introduced a new approach known as patient-centered treatment, which allows patients to choose whether to be treated at home or at a health facility. The Foundation also supports a social marketing campaign in parts of Tanzania, and is currently evaluating the potential for scaling it up.