



OPS 120
ANIVERSARIO

Estratégia Global e Inovações para o controle da Tuberculose

Dr. Miguel Aragon

Coordenador

Doenças Transmissíveis em Eliminação, Saúde Ambiental e Saúde do trabalhador

OPAS/OMS Brasil

OPS



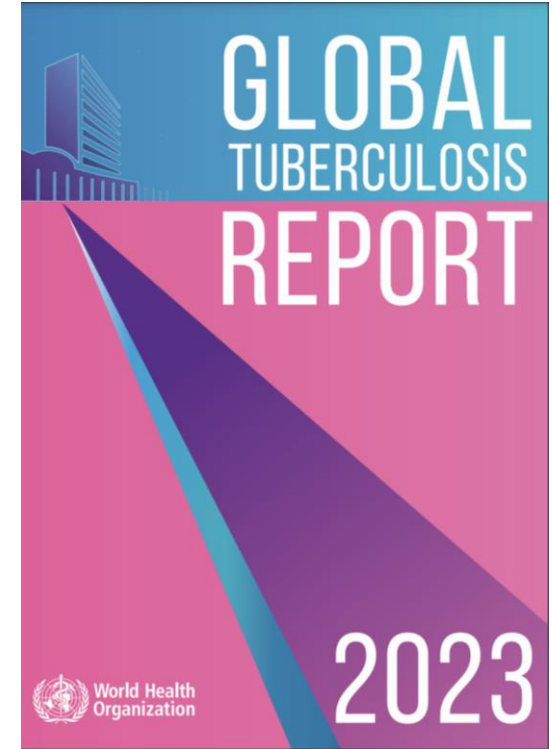
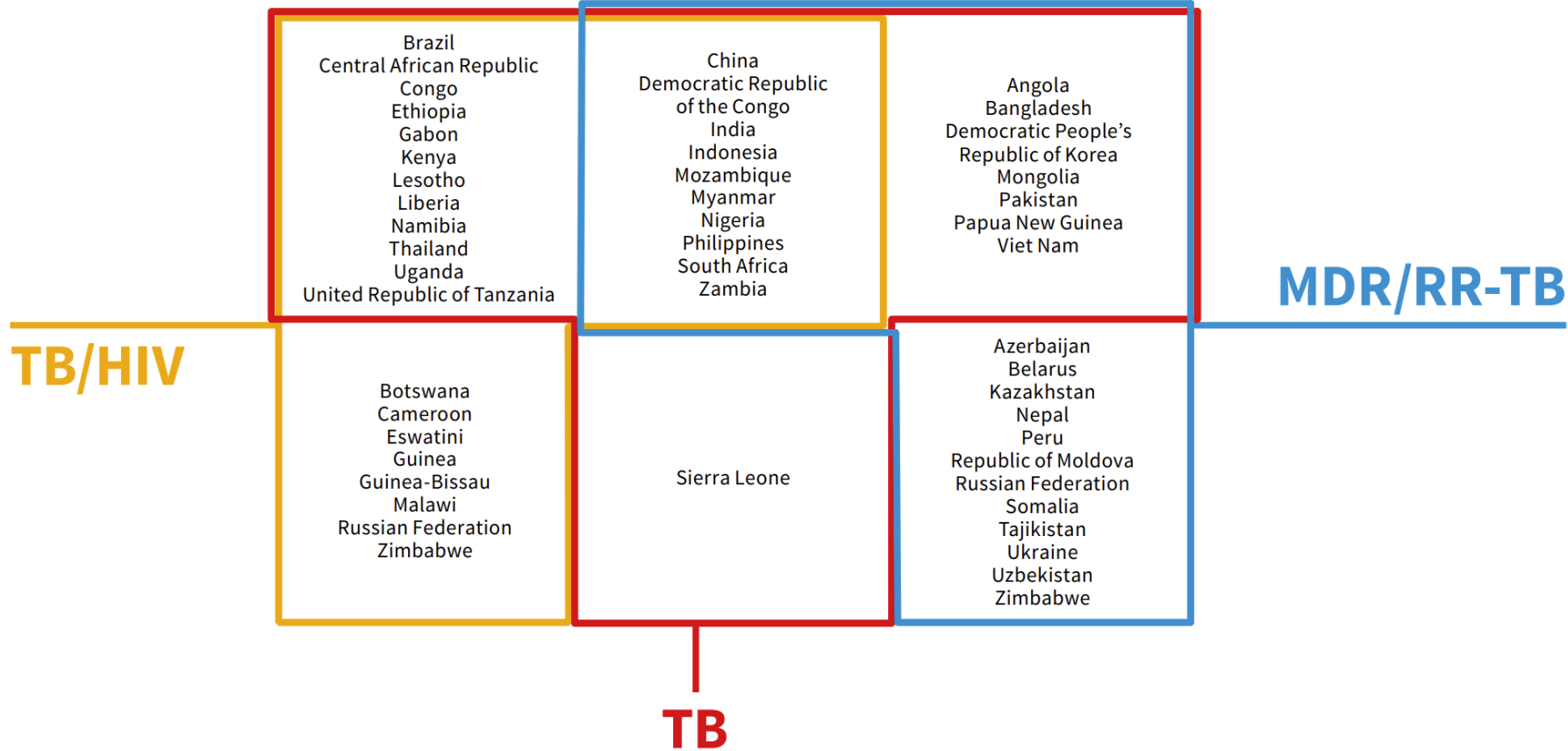
Organización
Panamericana
de la Salud



Organización
Mundial de la Salud
OFICINA REGIONAL PARA LAS Américas

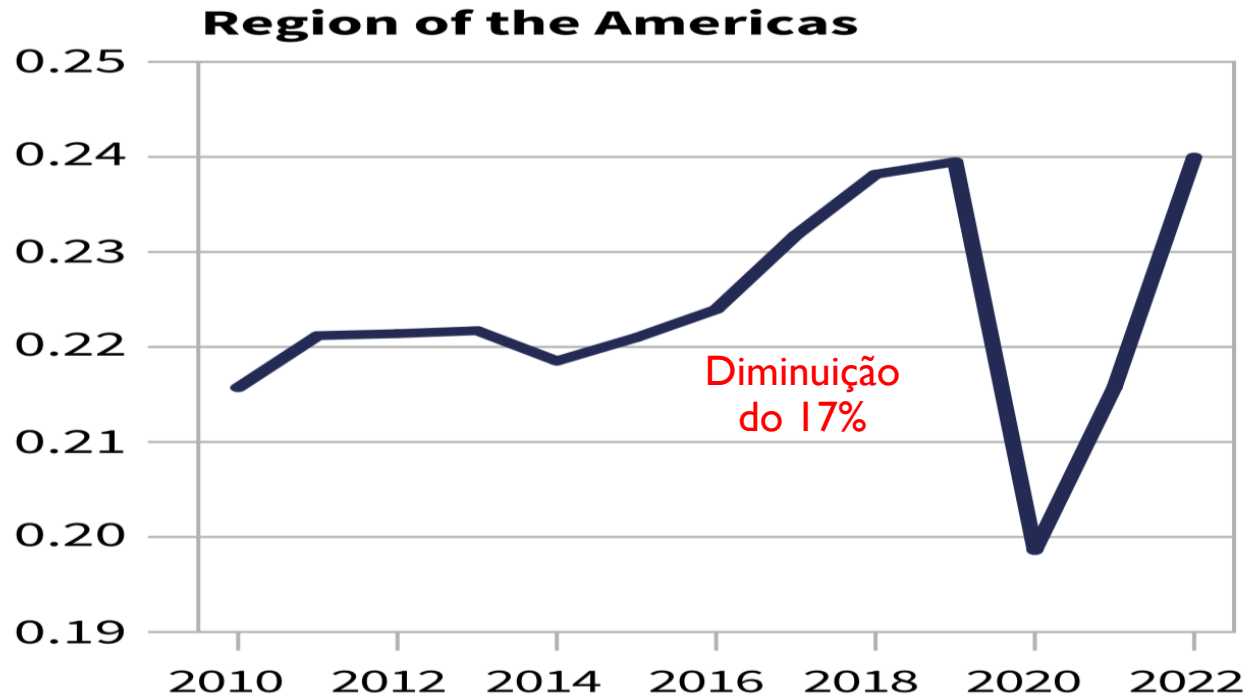
FIG. A3.1

The three global lists of high-burden countries for TB, HIV-associated TB and MDR/RR-TB to be used by WHO in the period 2021–2025, and their areas of overlap



Tuberculoses nas Américas

Impacto da pandemia da COVID-19 no número de novos notificadas con TB



Fuente: OMS, Informe Mundial de TB 2023

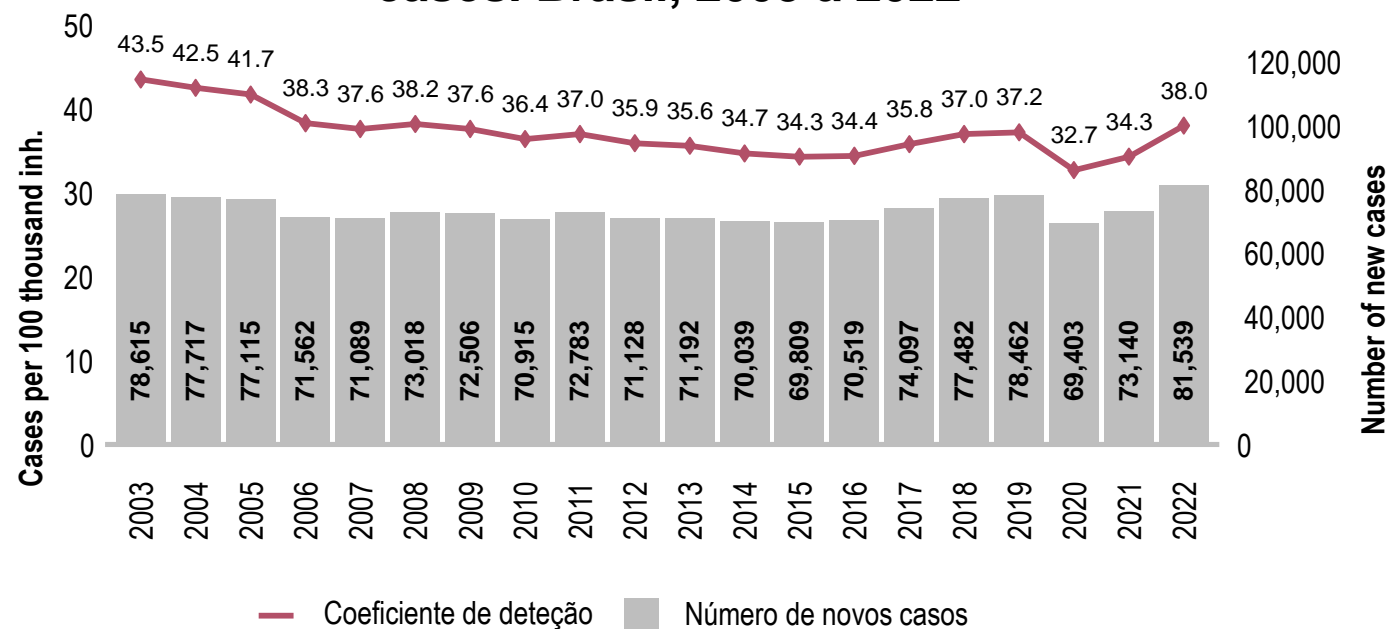
En 2022,

- **35.000** pessoas morreram por TB (10% más que 2021)
- **325.000** personas enfermaram de TB (5% más que 2021)

Contexto: TB EM BRASIL



Coeficiente de detecção e número de casos novos TB cases. Brasil, 2003 a 2022*



Source: SES/MS/Sinan and IBGE.
 Data extracted and qualified in Sep/2023.
 Preliminary data, subject to change.



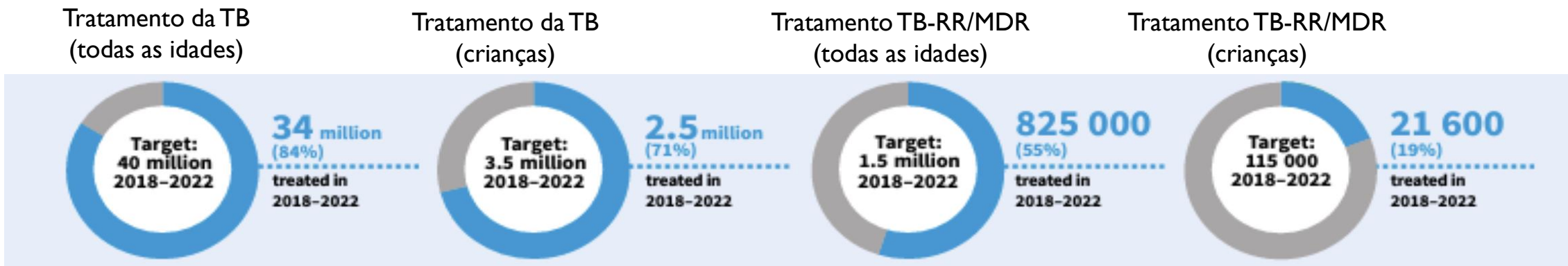


Principais compromissos

2018-2022

- Tratamento de 40 milhões de pessoas afetadas pela TB*
incluindo 3,5 milhões de crianças
- Tratamento de 1,5 milhão de pessoas com tuberculose
multirresistente*
incluindo 115.000 crianças

Progreso global até 2022



* Con énfasis en personas vulnerables y poblaciones marginadas.



Principais compromissos

2018-2022

- Fornecer tratamento preventivo a pelo menos 30 milhões de pessoas, incluindo 6 milhões de pessoas vivendo com HIV, 4 milhões de contatos com crianças (<5 anos), e 20 milhões de outros contatos domésticos.

Progresso global até 2022

Todas as idades

Pessoas com VIH

Contatos no lar < 5 anos

Contatos no lar \geq 5 anos



15.5 million
(52%)
treated in
2018-2022



11.3 million
(>100%)
treated in
2018-2022



2.2 million
(55%)
treated in
2018-2022



2.0 million
(10%)
treated in
2018-2022

Principais compromissos

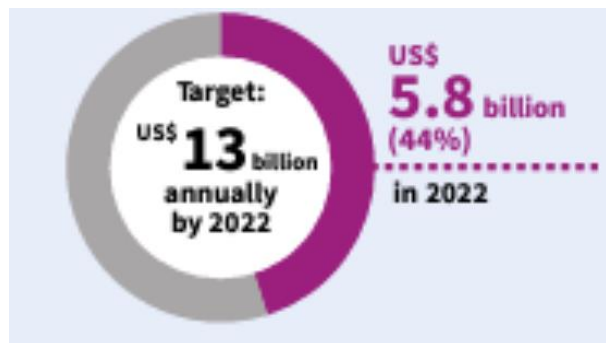
2018-2022

- **Mobilização de recursos financeiros:**
USD 13 bilhões por ano para implementação
USD 2 bilhões por ano para a investigação

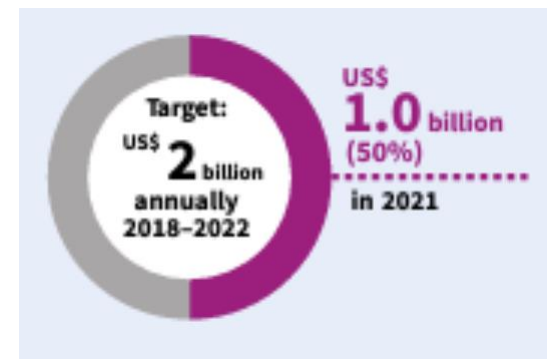


Progresso global até 2022

Acesso universal a prevenção, diagnóstico,
tratamento e atenção da TB



Investigação TB



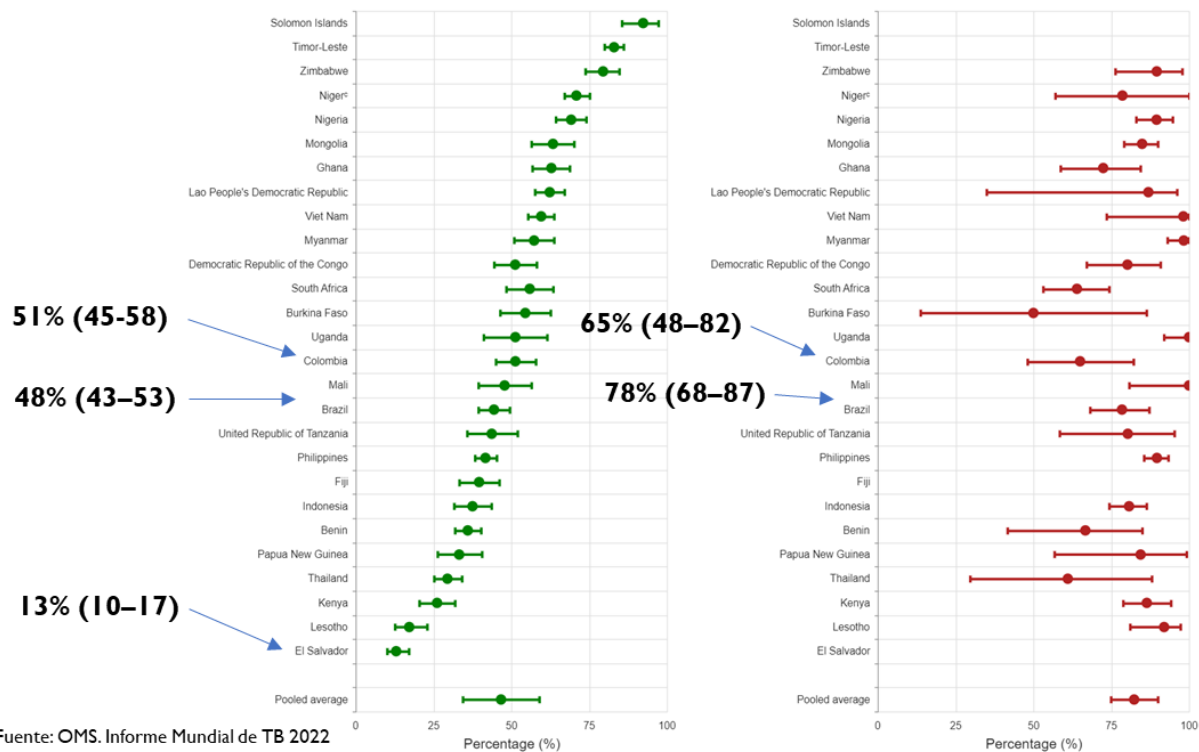
Custos catastróficos debido a TB

$$\frac{\text{Costos médicos directos} + \text{costos no médicos directos} + \text{costos indirectos}}{\text{Total de ingresos del hogar}} > 20\%$$

Estimaciones del porcentaje de pacientes con TB y sus hogares que enfrentan costos catastróficos, encuestas nacionales implementadas en 2016-2021

Todas las personas con TB

TB resistente solamente



Fuente: OMS. Informe Mundial de TB 2022

PORCENTAJE DE HOGARES QUE ENFENTAN COSTOS CATASTRÓFICOS DEBIDOS A LA TB

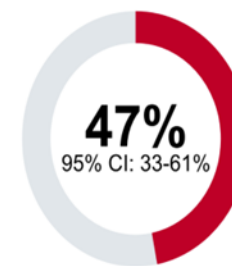
Meta:

CERO
PARA EL 2020

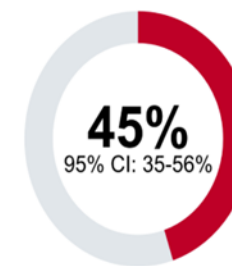
ENCUESTAS EN EJECUCIÓN ACTUALMENTE

Porcentaje promedio de personas con TB y sus hogares que enfrentan costos catastróficos (24 encuestas nacionales completadas desde 2015 en el mundo)

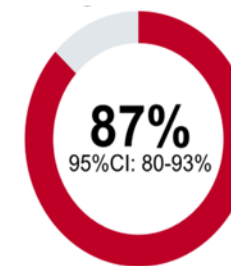
Todas las personas con TB



Personas con TB sensible



Personas con TB resistente



Fuente: OMS. Informe Mundial de TB 2021



METAS GLOBAIS PARA TUBERCULOSES DEFINIDAS PELA DECLARAÇÃO POLITICA DE ALTO NÍVEL 2023 NA ASSAMBLEIA GERAL NA LUTA CONTRA A TB



90%
by 2027

TB treatment coverage

(percentage of the estimated number of people who develop TB each year who are provided with quality-assured diagnosis and treatment)

Equivalent to up to 45 million people globally in the five-year period 2023–2027, including up to 4.5 million children and up to 1.5 million people with drug-resistant TB



90%
by 2027

Coverage of TB preventive treatment

(percentage of people at high-risk of developing TB disease who are provided with TB preventive treatment)

Equivalent to up to approximately 45 million people globally in the five-year period 2023–2027, including 30 million household contacts of people with tuberculosis and 15 million people living with HIV



100%
by 2027

Coverage of rapid diagnostic testing for TB

(percentage of those diagnosed with TB who were initially tested with a WHO-recommended rapid molecular test)



100%
by 2027

Coverage of health and social benefits package for people with tuberculosis



US\$ 22 billion
by 2027

Annual funding for essential tuberculosis services

US\$ 35 billion by 2030



US\$ 5 billion
by 2027

Annual investment in tuberculosis research



>1
Licensing of at least one new TB vaccine within five years

Facilitating the development and access to new TB vaccines

Commit to, working with the private sector and academia, accelerate the research, development, roll-out of safe, effective, affordable and accessible pre and post exposure vaccines, preferably within the next 5 years, for all forms of tuberculosis for people of all ages



Address the needs of people vulnerable to TB, including children

Comprehensive care for all people with TB is strengthened, with particular attention paid to people who are vulnerable or in vulnerable situations (e.g. people with HIV, people with TB-associated disabilities, older people, migrants, refugees, internally displaced people, and pregnant and lactating women) using specific models of care such as nutritional, mental health and psychosocial support, social protection, rehabilitation and palliative care.

There is a scaling-up of comprehensive efforts to close longstanding gaps in prevention, diagnosis, treatment and care of children.



Address the drug-resistant TB crisis

Work is undertaken towards the achievement of universal, equitable and affordable access to WHO-recommended diagnostics and drug-susceptibility tests, and all-oral shorter-duration treatment regimens for people with drug-resistant TB, complemented by monitoring and management of side-effects, together with care and support to improve treatment outcomes.



Build on interlinkages across the global health agendas of TB, UHC and PPPR to strengthen the TB response

TB services are established as essential elements of national and global strategies in an effort to advance UHC, address antimicrobial resistance and strengthen PPPR .

Integrate systematic screening, prevention, treatment and care of TB and for related health conditions within primary health care, including community-based health services.

Invest in public health infrastructure and the health workforce.



Address TB during health and humanitarian emergencies

TB services are safeguarded as essential health services during humanitarian and health emergencies



Strengthen engagement of civil society and communities affected by TB

Intensify national efforts to create enabling legal and social policy frameworks to combat inequalities, eliminate all forms of TB-related stigma, discrimination and other human rights barriers and violations.

Strengthen meaningful engagement of parliaments, civil society, and TB-affected local communities including young people and women in all aspects of the TB response, to ensure equitable and people-centred access to TB services, with increased and sustained investments, especially in community initiatives.



Destaques dos compromissos e pedidos feitos em 2023 na segunda reunião de alto nível da ONU sobre TB



Enable and strengthen TB research

Create an enabling environment for TB research and innovation across Member States and partners.

Strengthen research capacity and collaboration through TB research platforms and networks across the public and private sectors, academia and civil society.

Accelerate research, development and roll-out of safe, effective, affordable and accessible vaccines through global collaboration mechanisms, including the WHO accelerator council for new TB vaccines.



Promote affordable medicines

Promote equitable access to affordable, safe, effective and quality medicines, such as generics, vaccines, diagnostics and health technologies, including through the Stop TB Partnership/Global Drug Facility, to ensure availability and access to quality-assured and affordable commodities recommended by WHO.



Strengthen multisectoral accountability

Support the WHO multisectoral accountability framework for TB by strengthening high-level multisectoral accountability and review mechanisms, in line with national contexts, defining the roles and responsibilities of relevant sectors and stakeholders with the meaningful engagement of people and communities affected by TB.

Develop and implement ambitious, costed national TB strategic plans or health strategies with a multisectoral approach.



Reaffirm the central role of WHO

WHO is requested to continue providing global leadership to support Member States build a resilient response to TB as an integral part of the UHC agenda, and to also address the drivers and determinants of the epidemic, including in the context of health and humanitarian emergencies, with multisectoral engagement, the provision of normative guidance and technical support, and through monitoring, reporting and review of progress, and by advancing the tuberculosis research and innovation agenda.



Report and review progress

The Secretary-General, with the support of the World Health Organization, is requested to report, as part of his annual SDG report, on the global effort to end TB.

In 2027, the UN Secretary-General, with the support of WHO, is requested to present, to the UN General Assembly, a report on the progress achieved towards realizing the commitments made in this political declaration, within the context of achieving the 2030 Agenda for Sustainable Development.

A comprehensive review will be undertaken of progress by heads of state and government at a high-level meeting on TB in 2028.



Destaques dos compromissos e demandas feitos em 2023 na segunda reunião de alto nível da ONU sobre TB

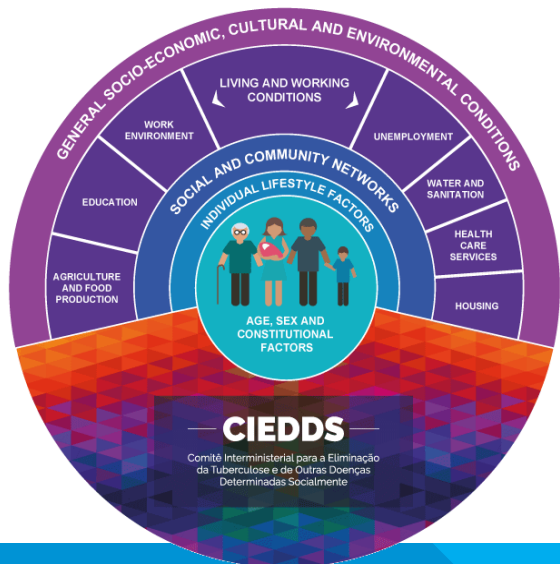
Abordando as Determinantes Sociais no contexto dos ODS



Objetivo 3

Meta 3.3

- Até 2030, acabar com as epidemia de AIDS, tuberculoses, malária e as doenças negligenciadas, e combater as hepatites, doenças transmitidas pela água e outras doenças transmissíveis.



- Para eliminar a tuberculoses, precisamos abordar suas determinantes sociais, e esta agenda vai além do setor da saúde.
- Outros setores estratégicos precisam assumir sua responsabilidade, no intuito que eles tem responsabilidades específicas e inversões para a eliminação da tuberculoses.



Abordagem multisetorial porque é preciso:

- Alcançar aos mais vulneráveis: PPL, PSR, migrantes, indígenas...
- Incrementar o investimento para proteção social, pesquisa, inclusão de novas tecnologias
- Focalizar no território = Atenção Básica
- Incrementar a cobertura do diagnóstico rápido de TB e TM/MDR
- Incrementar o tratamento da ILTB como medida de prevenção custo efetiva
- Empoderar as comunidades e sociedade civil...





PAHO 120th ANNIVERSARY

Obrigado !



PAHO



Pan American
Health
Organization



World Health
Organization
REGIONAL OFFICE FOR THE
Americas