

# Tuberculosis: A forgotten pandemic

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## **ABSTRACT**

**Summary:** Although Tuberculosis (TB) is a preventable and curable disease, it causes 1.5 million people to die, and 10 million people ill every year and is acting as the global top infectious killer. For HIV-infected people, it is the main cause of death and contributes to the main actor in antimicrobial resistance. Poverty, undernutrition, diabetes, tobacco smoking, and household air pollution are the main precipitating factors for TB. The progress is slow in addressing these problems and the world will not end TB as a global public health challenge by 2035 as aimed in the End TB Strategy. There is a reduction in providing treatment for DR-TB and a fall in global spending on prevention, diagnosis, and treatment services of TB these days. Drug-resistant TB (DR-TB) is still a public health crisis as only about one-third of patients with DR-TB accessed the treatment in 2020. TB diagnosis and treatment services encounter disruptions on both supply and demand sides like reducing health system capacity in providing services, inability to seek care in the lockdown context, and concerns about the risk of infection while going to health care facilities during the COVID-19 pandemic. TB notification decreased obviously during the early stages of the COVID-19 pandemic compared to previous years in most of the high-burden countries likely to have numerous undiagnosed cases of TB. Those people may face poor treatment outcomes due to delay diagnosis and treatment. Reallocation of TB funding to COVID-19 response and a significant decrease in TB funding is one of the factors worsening the TB pandemic during COVID-19. In the long run, TB-related deaths and structural lung diseases are expected to increase due to setbacks in tuberculosis control efforts by the COVID-19 pandemic. This trend is probably to continue in tuberculosis endemic regions with low coverage of SARS-CoV-2 vaccination and the emergence of new variants. To reduce the burden of mortality and morbidity associated with TB, countries and all partners will require advocacy, baseline preparedness, and more cohesive global coordination in areas of development of vaccines, improving funding in prevention and intervention strategies.