Top findings and messages in the 2024 report

Ending the global TB epidemic remains a distant goal but there are several positive trends.

The global rise in the number of people falling ill with TB (incident cases) that started during the COVID-19 pandemic has slowed and started to stabilize. The total was 10.8 million (95% uncertainty interval [UI]: 10.1–11.7 million) in 2023, a small increase from 10.7 million in 2022 although still much higher than 10.4 million in 2021 and 10.1 million in 2020.

Most of the global increase in incident cases between 2022 and 2023 reflects population growth. The TB incidence rate (new cases per 100 000 population) in 2023 was 134 (95% UI: 125–145), a very small (0.2%) increase compared with 2022.

Most of the people who develop TB disease each year are in 30 high TB burden countries, which accounted for 87% of the global total in 2023. Five countries accounted for 56% of the worldwide total: India (26%), Indonesia (10%), China (6.8%), the Philippines (6.8%) and Pakistan (6.3%).

In 2023, 55% of people who developed TB were men, 33% were women and 12% were children and young adolescents.

The global number of deaths caused by TB fell in 2023, reinforcing the decline that was achieved in 2022 after 2 years of increases during the worst years of the COVID-19 pandemic (2020 and 2021). TB caused an estimated 1.25 million deaths (95% UI: 1.13–1.37 million) in 2023, including 1.09 million among HIV-negative people and 161 000 among people with HIV.[a] The total was down from best estimates of 1.32 million in 2022, 1.42 million in 2021 and 1.40 million in 2020, and below the pre-pandemic level of 1.34 million in 2019.

Despite this progress, TB has probably returned to being the world's leading cause of death from a single infectious agent (replacing COVID-19).[b]

Globally, the net reduction in the TB incidence rate between 2015 and 2023 was 8.3%, far from the WHO End TB Strategy milestone of a 50% reduction by 2025. The WHO African and European regions have made the most progress (reductions of 24% and 27%, respectively); 79 countries achieved reductions of at least 20%.[c]

The net reduction in the global number of deaths caused by TB between 2015 and 2023 was 23%, almost one third of the way to the WHO End TB Strategy milestone of a 75% reduction by 2025. The WHO African and European regions have made the most progress (reductions of 42% and 38%, respectively); 43 countries achieved reductions of at least 35%.[c]

Reductions in the number of deaths from TB since 2022 and the slowing increase in the TB incidence rate are the result of substantial post-COVID recovery in TB diagnosis and treatment.

A global total of 8.2 million people were reported as newly diagnosed with TB in 2023, up from 7.5 million in 2022 and 7.1 million in 2019 and far above the levels of 5.8 million in 2020 and 6.4 million in 2021. Those newly diagnosed in 2022 and 2023 probably included a sizeable backlog of people who developed TB in previous years, but whose diagnosis and treatment was delayed by COVID-related disruptions.

The global gap between the estimated number of people developing TB (incident cases) and the reported number of people newly diagnosed with TB (notified cases) narrowed to a best estimate of 2.7 million[d] in 2023, down from about 4 million in both 2020 and 2021 and below the pre-pandemic level of 3.2 million in 2019.

Globally in 2023, 175 923 people were diagnosed and treated for multidrug-resistant or rifampicin-resistant[e] TB (MDR/RR-TB); this was 44% of the 400 000 people (95% UI: 360 000–440 000) estimated to have developed MDR/RR-TB in 2023.

The treatment success rate for drug-susceptible TB remains high (at 88%) and has improved to 68% for MDR/RR-TB.

One of the barriers to closing diagnostic and treatment gaps is financial costs faced by people with TB and their households. About 50% face total costs (direct medical expenditures, nonmedical expenditures and indirect costs such as income losses) during diagnosis and treatment that are catastrophic (>20% of annual household income).[f] This is far above the WHO End TB Strategy target of zero. Reducing this burden requires faster progress towards UHC and better levels of social protection.

Progress towards new global targets for 2027 set at the 2023 UN high-level meeting on TB can be summarized as follows:

- Coverage of rapid testing for TB: target 100% of those newly diagnosed; status in 2023, 48%.
- TB treatment coverage: target 90%; status in 2023, 75%.
- Coverage of TB preventive treatment: target 90% among high-risk populations; status in 2023, 21% among household contacts of people diagnosed with TB, 56% among people living with HIV.
- Availability of a new TB vaccine that is safe and effective: target, preferably within five years; status in 2023, six vaccines in Phase III trials.
- Funding for TB prevention, diagnostic and treatment services: target US$ 22 billion; status in 2023, US$ 5.7 billion.[g]
- Funding for TB research: target US$ 5 billion; status in 2022, US$ 1.0 billion.[h]

Ending TB requires that commitments made at the 2023 UN high-level meeting on TB are translated into action.

[a] Deaths from TB among people with HIV are officially classified as deaths from HIV/AIDS.

[b] The number of deaths from COVID-19 officially reported to WHO in 2023 amounted to 320 000. Estimates adjusted for late reporting as well as underreporting have not yet been produced, but are considered unlikely to exceed the total for TB. WHO will publish a definitive assessment for 2023 in a future edition of the Global Health Estimates.

[c] This reduction corresponds to the first (2020) milestone of the End TB Strategy.

[d] The rounded difference between 10.84 million incident cases and 8.16 million notifications of new cases.

[e] Rifampicin is the most powerful first-line anti-TB drug. MDR-TB is defined as resistance to rifampicin and isoniazid.

[f] This indicator is not the same as the SDG indicator for catastrophic health expenditures.

[g] In constant US$ values for 2023.

[h] The source of this figure is the latest report on funding for TB research published by Treatment Action Group. (https://www.treatmentactiongroup.org/resources/tbrd-report/tbrd-report-2023/)