

WHO's Global Tuberculosis Report 2022

On Oct 27, WHO released its Global Tuberculosis Report 2022. The document provides an extensive assessment of the global tuberculosis burden, based on data reported from 202 countries and territories, including over 99% of the global population and of tuberculosis cases.

According to the Report, the COVID-19 pandemic is still negatively affecting tuberculosis diagnosis and care—and hence the burden of the disease—and has caused a slowdown, interruption, or reversal of the progress made up to 2019 in combating tuberculosis.

An estimated 10.6 million people became ill with tuberculosis in 2021, compared with 10.1 million in 2020, and 1.6 million people died from tuberculosis in 2021 (including 187 000 individuals living with HIV), compared with 1.5 million in 2020 (including 214 000 individuals living with HIV). In addition, the incidence rate of tuberculosis increased by 3.6% in 2021 relative to 2020, suggesting a reversal from the trend of nearly 2% decrease per year during the past two decades.

In 2014, the World Health Assembly adopted WHO's End TB Strategy, which counts among its aims an 80% decrease in the tuberculosis incidence by 2030, in accordance with UN Sustainable Development Goal 3, which includes ending the global tuberculosis epidemic. However, as Michel Gasana, (WHO Regional Office for Africa, Brazzaville, Congo [Brazzaville]) pointed out, "We are far from reaching the UN Sustainable Development Goal target of ending the tuberculosis epidemic by 2030."

Gasana told *The Lancet Microbe*, "Globally, the cumulative reduction in the tuberculosis incidence rate from 2015 to 2021 was 10%. Only the WHO African Region in 2021 reached the 2020 incidence milestone of the End TB Strategy, with a reduction of 22% since 2015."

The burden of drug-resistant tuberculosis also increased by 3% between 2020 and 2021, with 450 000 incident cases of rifampicin-resistant tuberculosis reported in 2021. Russia and other countries in eastern Europe and central Asia reported the highest proportions (>50%) of MDR or rifampicin-resistant tuberculosis among previously treated individuals. In 2021, only 161 746 people (20 000 fewer than in 2019) requiring treatment of MDR or rifampicin-resistant tuberculosis received it.

During the COVID-19 pandemic, important tuberculosis services were not offered to many people who needed them. As a result, newly diagnosed tuberculosis cases decreased from 7.1 million in 2019 to 5.8 million in 2020 (a level last observed in 2012). In 2021, the number increased to 6.4 million, but remained below pre-pandemic numbers. This decrease relative to before the COVID-19 pandemic suggests an increase in undiagnosed and untreated tuberculosis cases, initially leading to increased community spread of the infection and tuberculosis deaths, followed by a rise in the number of people developing the disease.

"The WHO Global Tuberculosis Report is a stark reminder that tuberculosis is now killing nearly twice as many people as COVID-19 every day," David Dowdy (Johns Hopkins Bloomberg School of Public Health, Baltimore, MD, USA) told *The Lancet Microbe*. He added, "The major challenges in fighting tuberculosis are not technical. We have good diagnostic tests, good drugs, and good preventive treatment (though we can always do better). The major challenge to ending tuberculosis is a lack of global political will to mobilise resources to fight tuberculosis in the same way that we have done for diseases like COVID-19."

The 2022 Report also pointed out some gains in tackling tuberculosis. For example, in 2020, the first year of the COVID-19 pandemic, the quality of tuberculosis treatment was maintained, with an 86% success rate; in 2018–22, preventive tuberculosis treatment of individuals living with HIV has exceeded the global target of 6 million; and countries have been increasingly taking up new WHO recommendations and tools leading to improved outcomes.

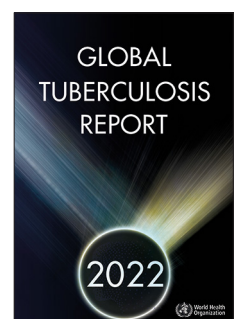
To improve the global tuberculosis situation, experts have recommended some measures. Gasana commented that "[there] is a decline in global spending on essential tuberculosis services from US\$6 billion in 2019 to US\$5.4 billion in 2021. We need to mobilise additional funds and increase tuberculosis funding to address the impact of COVID-19."

"The reported rise in notified cases calls for an invigorated response to tuberculosis control, which will require both political will on the part of governments and civil society as well as substantial financial investment in tuberculosis diagnosis and treatment throughout the world," said Megan Murray (Harvard Medical School, Boston, MA, USA).

Madhukar Pai (McGill International TB Centre, Montreal, QC, Canada) told *The Lancet Microbe*, "Right now, improving tuberculosis case detection is urgent. All countries have scaled up molecular testing and genetic sequencing capacity for COVID-19, and this expanded capacity could be used for tuberculosis testing. Also, huge advances have been made in digital health tools, tele-health, and home delivery of medicines. I think all of these could help with the recovery of tuberculosis services."

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For the **Global Tuberculosis Report 2022** see <https://www.who.int/publications/i/item/9789240061729>

For the **End TB Strategy** see <https://www.who.int/teams/global-tuberculosis-programme/the-end-tb-strategy>

For **UN Sustainable Development Goals** see <https://sdgs.un.org/2030agenda>