Congress of the United States Washington, DC 20515

March 30, 2017

The Honorable Hal Rogers Chairman Subcommittee on State, Foreign Operations, and Related Programs HT-2, The Capitol Washington, DC 20515 The Honorable Nita M. Lowey Ranking Member Subcommittee on State, Foreign Operations, and Related Programs 1016 Longworth House Office Building Washington, DC 20515

Dear Chairman Rogers and Ranking Member Lowey:

Thank you for your leadership and dedication to global health and development. We write to request that you provide \$450 million in funding for bilateral tuberculosis (TB) control in the Fiscal Year (FY) 2018 State, Foreign Operations and Related Programs Appropriations bill to build global capacity to stop this terrible disease.

Tuberculosis (TB) is a preventable and curable airborne infection that kills more people worldwide than any other infectious disease. In 2015, TB claimed 1.8 million lives, and 10.4 million people became ill with the disease.

Last year, the United Nations convened to consider the substantial dangers posed by antimicrobial resistance—a serious international health crisis in which diseases are able to resist the very drugs meant to destroy them. Drug resistant tuberculosis is particularly concerning, as it is airborne and very costly to treat. In 2015, there were an estimated 480,000 new cases of multidrug resistant TB worldwide.

As the top killer of people with HIV/AIDS, TB is undermining the substantial gains we have made through PEPFAR. As the Subcommittee works to maximize the impact of our global health dollars, we urge you to protect our PEPFAR investments by supporting funding to prevent, detect and treat TB.

If left unchecked, the TB epidemic and proliferation of drug resistant TB strands could erase decades of progress in the global effort to defeat this disease, much of which has been achieved with U.S. support.

Funding for USAID's TB control program helps build capacity in countries highly-burdened by TB, supports the development of new diagnostic and treatment tools, and is also authorized to support research to develop new vaccines. Most TB drugs were developed more than 40 years ago and must be taken for six to nine months. The TB vaccine, which is more than 85 years old, provides some protection against severe forms of TB in children, but is unreliable against adult pulmonary TB, which accounts for most of the worldwide disease burden. U.S. investments can help bring technology to scale and support new tools to fight TB.

In 2008, Congress passed into law the Tom Lantos and Henry J. Hyde United States Global Leadership Against HIV/AIDS, Tuberculosis, and Malaria Reauthorization Act. An allocation of \$450 million in FY 2018 would be consistent with this authorization and commensurate with the global burden of TB.

We recognize that you face difficult choices in deciding how to best fund the many foreign assistance programs that require support. We thank you for your continued leadership, and urge you consider TB as an important priority in the FY 2018 appropriations bill.

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