



Opinion

Why we need to embrace bold solutions in fighting tuberculosis

BY LYNDA LANGE

The resurgence of tuberculosis is an urgent global problem around the world, but also in Canada among Indigenous peoples, particularly the Inuit. This reality has prompted the UN to convene a high-level meeting this month at its headquarters in New York.

On Sept. 26, heads of state will meet to consider ways to combat a disease that has become more and more drug resistant. One proposal under consideration by UN member countries is the Life Prize, a project that aims to bring researchers together to develop a treatment regimen of one month or less for all types of TB.

At first glance, the project's objective appears impossibly ambitious. There are many challenges in both diagnosing and treating tuberculosis, given that it now has several drug and even multi-drug resistant strains.

The idea was first presented in 2017 at the World Conference of the International Union Against TB and Lung Disease (the Union) in Guadalajara, Mexico. From the beginning, there was widespread support from both medical and civil society groups, including from the Médecins Sans Frontières/Doctors Without Borders (MSF).

Since the 1950s, TB has been more or less curable with medication, but the treatments are lengthy—they can last six to 12 months or more—hard to tolerate, and can have serious side effects, including deafness. Because medication can be prohibitive, many of those infected are forced to quit treatment too soon. This contributes to the spread of the disease and the development of drug-resistant strains.

With support from the UN, the World Health Organization, and

MSF, there's cause to be hopeful that we're on the cusp of a breakthrough. MSF, in particular, has a track record of medical innovation and is on the front line, delivering treatment where public health cannot meet the need.

MSF has pitched in with globally wide-ranging clinical trials of some new TB treatments, called TBPractecal. Since MSF treats 20,000 people for TB each year, these trials will surely complement Life Prize.

Life Prize asks for new levels of collaboration among researchers and research institutions, proposing the creation of a global network that can share data and pool intellectual property, through the existing Medicines Patent Pool, which is backed by the UN.

The project's funding component is equally important and ambitious. Life Prize stresses the need for funding by governments in order to de-link the cost of research and development from the final cost of the treatment. Understandably, drug companies invest in research and development for drugs that they think will be profitable. Unfortunately, that seldom means new and better drugs to treat the diseases of the poor.

We may wonder if de-linking R&D costs from the final price is practical or even possible in a world of powerful corporate lobbies. In fact, the idea of non-private funding that enables this is not unheard of in international agreements.

In 2016, there was a declaration at the UN meeting discussing efforts to combat anti-microbial resistance—of which TB is the prime example—that recognized the need for governments not only to fund research but also to de-link the cost of R&D from the final price. This is crucial if new TB regimens are to be accessible and affordable.



Heads of state are expected to convene for a high-level meeting at the UN to discuss efforts to combat the resurgence of tuberculosis. Prime Minister Justin Trudeau's leadership at the meeting is needed, writes Lynda Lange of the Grandmothers Advocacy Network. *The Hill Times* file photograph by Andrew Meade

In Canada, Parliament passed motion 132 last year, which instructs the House Health Committee to study ways of lowering costs and increasing access to medicines developed using federally funded research, both in Canada and globally. This is a good step.

TB is now the leading infectious-disease killer in the world and the leading cause of death for those who are HIV positive. Far from being a thing of the past, it is now increasing at a frightening pace. Multi-drug resistant TB is as contagious as TB has always been, and some think that anti-microbial resistance is one of the greatest threats facing the world today.

At the same time, TB is a development issue, because 95 per cent of cases occur in poor countries. This has a heavy impact on places such as sub-Saharan Africa, where grandmothers, who may themselves be ill, still struggle to care for families.

It is hoped that Prime Minister Justin Trudeau will attend the UN meeting in September, that he will commit support for the Life Prize, and otherwise show leadership on this issue in co-operation with other countries.

Lynda Lange is a member of the Grandmothers Advocacy Network.

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