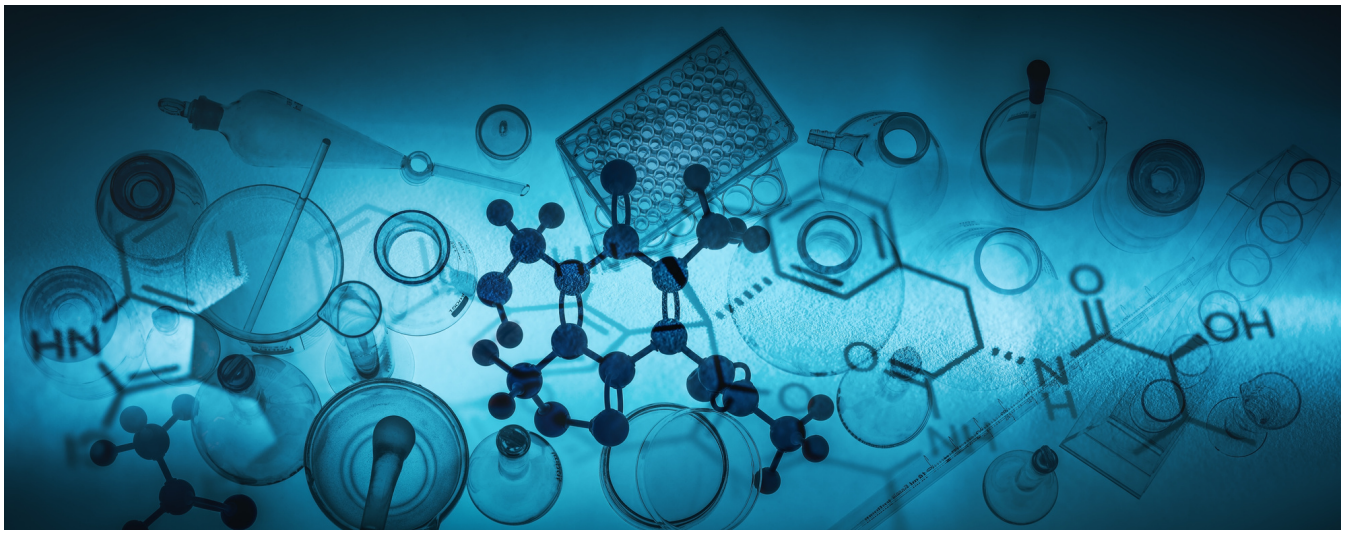
VOLUME 3, ISSUE 10, OCTOBER 2023

# THE MONTHLY DOSE

## Official Newsletter of The Mueller Health Foundation




### WHAT'S NEW AT THE MUELLER HEALTH FOUNDATION:

The Mueller Health Foundation attended numerous exciting events during UN General Assembly week, including the daylong "TB Innovation Summit", a session on "New TB Tools: Is ending TB (finally) within sight?", and a discussion on "Unmet Needs in Tuberculosis Diagnosis and Case Management".

We've learned a lot from our colleagues and are grateful for the TB Community at large for continuously raising awareness about tuberculosis and pushing for increased action.

Stay tuned for more updates!

## LATEST NEWS: KEY TAKEAWAYS FROM THE UN HIGH-LEVEL MEETING ON TUBERCULOSIS

We at The Mueller Health Foundation closely followed and participated in events related to tuberculosis during the 78th United Nations General Assembly (UNGA) in New York. Along with the global TB community, we are excited that the United Nations Member States have formally adopted the Political Declaration of the High-Level Meeting (HLM) on the Fight Against Tuberculosis. The Declaration contains the most ambitious goals to date towards eradicating tuberculosis. We have summarized key accomplishments as well as opportunities for improvement below:

- ✓ Member states committed to providing life-saving treatment for up to 45 million people between 2023 and 2027, including up to 4.5 million children and up to 1.5 million people with drug-resistant tuberculosis.
- ✓ Member states agreed to provide up to 45 million people with preventive treatment, including 30 million household contacts of people with tuberculosis, including children and 15 million people living with HIV.
- ✓ Member states also committed to increasing annual global TB funding levels to over four times the current level ($5.4 billion) towards reaching $22 billion annually by 2027, increasing to $35 billion by 2030.
- ✓ Member states also committed to mobilize $5 billion a year by 2027 for tuberculosis research and innovation. This is a five times increase from the current $1 billion a year towards the development of point of care diagnostics, vaccines for all forms of tuberculosis, and shorter, safer and more effective treatment regimens.

- ✗ Member states failed to attach deadlines to these commitments which had been prioritized by TB-affected communities in their 'Deadly Divide' Accountability Report.
- ✗ Member states failed to agree to several other key measures requested in the TB Community's Key Asks document, including a strong, robust, system of accountability in the Political Declaration to ensure regular and timely monitoring and follow-up, as well as weakened language on having a safe and effective new TB vaccine available in the next five years.

Information Source and Credit: https://www.stoptb.org/news/historic-political-declaration-tb-adopted-member-states-united-nations-high-level-meeting

For more news, please also take a look at our top 3 picks for **October** in this newsletter, where we highlight novel research findings and news around the prevention and treatment of tuberculosis around the world.

The Mueller Health Foundation

# MHF TOP PICKS FOR OCTOBER

Every month, we at the Mueller Health Foundation like to showcase interesting news and updates in the field of tuberculosis (TB). Below are our top **3** picks for **October:**

### 1.Global Burden of Disease Due to Rifampicin-Resistant Tuberculosis: A Mathematical Modeling Analysis

In 2020, almost half a million individuals developed rifampicin-resistant tuberculosis (RR-TB). In this study, the researchers estimated the global burden of RR-TB over the lifetime of affected individuals. They synthesized data on incidence, case detection, and treatment outcomes in 192 countries. Using a mathematical model, they projected disability-adjusted life years (DALYs) over the lifetime for individuals developing tuberculosis in 2020 stratified by country, age, sex, HIV, and rifampicin resistance. The research concluded that the incidence of RR-TB in 2020 was responsible for an estimated 6.9 million DALYs, 44% of which accrued among TB survivors. While the South-East Asia Region was estimated to have the greatest absolute burden of RR-TB, former Soviet Union countries and southern African countries had the highest burden of RR-TB per population. To learn more, you can access the full article at: https://www.nature.com/articles/s41467-023-41937-9

### 2. Programmatic Implementation of Depression Screening and Remote Mental Health Support Sessions for Persons Recently Diagnosed with TB in Lima, Peru

An international study on the outskirts of Lima in Peru assessed the impact of providing comprehensive mental health care on depression and tuberculosis treatment outcomes. The research team found that nearly half of those starting treatment for tuberculosis exhibited depressive symptoms. By providing a combination of mental health and social service programs depressive symptoms not only improved, but also correlated with better treatment outcomes. Programs included psychoeducation, mutual support groups, occupational therapy and urgent referrals for higher-level mental health care. Looking ahead, these community-rooted strategies that are centered on patients and creating equitable, long-term partnerships with local leaders and health systems, are some of the most powerful methods for transforming and strengthening health systems and improving access to care, particularly for people with low incomes and members of marginalized populations. To learn more, you can read the paper here:https://www.researchgate.net/publication/370634076_Programmatic_implementation_of_depression_screening_and_remote_mental_health_support_sessions_for_persons_recently_diagnosed_with_TB_in_Lima_Peru_during_the_COVID-19_pandemic

### 3.Investigational Three-Month TB Regimen Is Safe but Ineffective, NIH Study Finds

The first clinical trial of a three-month tuberculosis (TB) treatment regimen is closing enrollment because of a high rate of unfavorable outcomes with the investigational course of treatment. AIDS Clinical Trials Group 5362, also known as the CLO-FAST trial, sought to evaluate the safety and efficacy of a three-month clofazimine- and high-dose rifapentine-containing regimen. An interim data analysis showed that participants taking the investigational regimen experienced ongoing or recurring TB at rates above thresholds set in the study protocol. Based on these findings, the study's independent Data Safety and Monitoring Board (DSMB) recommended closing enrollment and modifying the treatment and follow-up of participants who received the investigational regimen to optimize outcomes. You can learn more and access the full article here: https://www.nih.gov/news-events/news-releases/investigational-three-month-tb-regimen-safe-ineffective-nih-study-finds

## DID YOU KNOW?

We would like to highlight some of the outstanding work that our grantee REACH in India has been doing as part of creating a novel community-care model for people with drug-resistant tuberculosis in the Chennai area. Below are a few highlights that showcase significant improvements accomplished with the implementation of the pilot community-care model in 2023:

- REACH hosts survivor meetings for patients that have been diagnosed with DR-TB to share their experiences with each other. These meetings also help to close the feedback loop for practitioners on how to best support patients in their journey of battling DR-TB. The REACH coodinators also incorporate family members and friends of the patients into these meetings to provide a learning opportunity on how to best support patients undergoing treatment.
- REACH collaborated with students at the local university to create and perform a puppet show to educate the local communities about basic information related to DR-TB. The puppet show also highlighted the importance of seeking treatment to prevent spread.
- The REACH team has also created flyers in English as well as multiple local languages to help communities better understand basic facts about DR-TB, including the importance of testing for the disease and adhering to the treatment.
- The REACH team also compiled a comprehensive landscape review of community-care models in India and around the world to help structure and best define a set of patient-centered services needed in the novel community-care model for DR-TB that is being piloted in the Chennai region of India this year.
- A baseline comparison to 2022 DR-TB detection and treatment of patients already showed great effectiveness of the novel community-care model for DR-TB. Compared to not having an intervention in 2022, implementing the DR-TB community-care model already increased the diagnosis of DR-TB patients by approximately **115%** in the Chennai region.
- Additionally, in 2022 without any intervention, approximately **81%** of people diagnosed with TB received treatment, compared to **94%** of people diagnosed with TB who were put on treatment with the implementation of the new community-care model in the first half of 2023.
- Without any interventions, only **59%** of patients receiving treatment continued or completed the treatment course in 2022. With the new community-care model, within the first half of the year, **100%** of patient stayed on the recommended treatment regimen and there was no loss to follow-up or death.

Information Source: REACH Monthly Update Report August 2023