

Elimination of TB

Published On: 13-08-2023

Why is in news? In TB detection, India far from meeting the 2025 goal

In March 2016, in his Mann Ki Baat address, Prime Minister urged people to make India TB-free; in 2018 he set the target to "eliminate TB by 2025".

To fulfil this goal, the Health Ministry rolled out the **National Strategic Plan (NSP) 2017-2025 to "eliminate" TB** by 2025.

Though the Plan outlined a paradigm shift in approach and strategy to achieve the ambitious goal, by 2020, it became clear that the NSP will not be able to meet these objectives. A new NSP 2020-2025 to end TB was launched.

Tuberculosis:

Tuberculosis (TB) is an infectious disease caused by Mycobacterium tuberculosis.

It commonly affects the lungs, but can also affect other parts of the body.

It is a **treatable and curable** disease.

TB is spread **from person to person through the air**. When people with lung TB cough, sneeze or spit, they propel the TB germs into the air.

Common symptoms of active lung TB are cough with sputum and blood at times, chest pains, weakness, weight loss, fever and night sweats.

Treatment - Drugs include Isoniazid (INH), Rifampicin, Pyrazinamide and Ethambutol (HRZE) in daily doses

Bacille Calmette-Guérin (BCG) is a vaccine for TB disease.

TB status in India:

In 2017, the World Health Organization had estimated that **undernutrition is responsible for twice the number of TB cases than HIV globally**.

Any attempt to end/eliminate TB in India by 2025 will become possible only if undernutrition among people is addressed. As per conservative estimates, 40% of new TB cases annually in India are due to undernutrition.

Many new cases of TB are attributable to five risk factors — undernourishment, HIV infection, alcohol use disorders, smoking (especially among men) and diabetes, says the **WHO Global TB report 2022**.

In TB-endemic countries such as India, undernutrition is the most widely prevalent risk factor, accounting for the "highest population attributable risk for TB in India".

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It is also responsible for increased TB disease severity, higher mortality and poor treatment outcomes.

A study in India found that severe undernutrition at diagnosis was associated with a two-fold higher risk of death.

Initiatives taken by the Government for tackling TB:

National Tuberculosis Elimination Programme (NTEP):

The programme is strengthened to **meet the goal of ending the TB epidemic by 2025** from the country, five years ahead of the Sustainable Development Goals (SDG) for 2030.

It was previously known as Revised National Tuberculosis Control Programme (RNTCP).

The government reached over a billion people in 632 districts/reporting units.

National Strategic Plan for TB Elimination:

It was launched to achieve the target of ending TB by 2025 in a **mission mode**.

It is a **multi-pronged approach** which aims to detect all TB patients with an emphasis on reaching TB patients seeking care from private providers and undiagnosed TB in high-risk populations

Ni-kshay Poshan Yojana (NPY) (Nutritional Support to TB):

It is a direct benefit transfer (DBT) scheme for nutritional support to TB patients. It was launched in 2018.

It helps to meet the nutritional requirements of TB patients, especially the underserved.

All notified TB cases are provided with a financial incentive of ?500 per month.

According to the **2022 India TB report**, seven million TB patients have benefited between 2018 and 2022, and ?2,089 crore has been disbursed during this period.

Also, as of March 9, 2023, 9.55 lakh consented TB patients across India adopted by **Ni-kshay Mitras** will receive nutritional support.

Patient Provider Support Agencies (PPSA):

To engage the private sector, Patient Provider Support Agencies (PPSA) have been rolled out across 250 districts through the domestic setup and JEET initiative

Universal Drug Susceptibility Testing (UDST):

To ensure every diagnosed TB patient is tested to rule out drug resistance before or at the time of treatment initiation itself.

Pradhan Mantri TB Mukt Bharat Abhiyaan:

To bring together all community stakeholders to support those on TB treatment and accelerate the country's progress towards TB elimination.

Ayushman Bharat - Health and Wellness Centres:

To decentralize comprehensive primary healthcare including TB care services at the grassroots level.

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Bedaquiline and Delamanid:

Newer drugs like Bedaquiline and Delamanid have also been made available for management of DRTB.

Some Global Efforts:

The WHO (World Health Organisation) has launched a joint initiative "Find, Treat, All #EndTB" with the Global Fund and Stop TB Partnership.

WHO also releases the **Global Tuberculosis Report**.

Challenges to eradicate TB:

Lack of clarity on definitions of 'end' TB

Poor primary health-care infrastructure in rural areas

Unregulated private health care leading to widespread irrational use of first-line and second-line anti-TB drugs

Unpasteurized milk or dairy products made from raw milk is another potential source of TB for humans

Lack of awareness

Multidrug-resistant TB (MDR TB)

Way forward:

Development and wide use of an adult TB vaccine

To lower production cost so as to make few available anti-TB drugs toeveryone

Inventing injection-free and oral pills for TB

Use of AI-assisted handheld radiology with 90-second reporting and 95% accuracy for diagnosing TB.

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