

July 28, 2015

President Barack Obama
The White House
Washington, DC

Dear Mr. President:

We would like to express our strong support for your decision to develop a National Action Plan on Drug Resistant Tuberculosis, under the auspices of the White House Office of Science and Technology Policy.

The interagency development of the plan is overseen by Susan Collier-Monarez, of the Office of Science and Technology Policy, who recently convened a stakeholder dialogue to discuss the plan. Her energy and commitment to open dialogue, and to developing a robust and meaningful plan, are clear. We very much look forward to working with Dr. Collier-Monarez over the coming year to provide input and support to the plan's implementation.

As you know, this is a matter of great urgency both for the US and our partners abroad. It is an essential component of the US response to antibiotic resistant bacteria, an issue on which you have been a strong leader.

The WHO estimates that there are 480,000 cases of drug resistant TB globally. Drug resistant TB is an airborne pathogen, yet currently less than a quarter of the people needing treatment are receiving it. Once on effective treatment patients rapidly become uninfected, yet we are missing this crucial opportunity for prevention. Tragically, it is the children in the families of people with TB who often become infected and go on to develop the most serious forms of the disease.

Women are also impacted. TB is the leading cause of death from infection in women of childbearing age. The disease preys disproportionately on expectant mothers, increasing the rate of miscarriages and the risk of death for both the mother and her baby.

Currently in the U.S., there are 3 cases of the most dangerous form of drug resistant TB, Extensively Drug Resistant TB (XDR TB), which can cost over \$1 million to treat per case. Many states are grappling with extremely costly cases of Multi Drug Resistant TB (MDR TB), as well as the hundreds of people exposed and infected, as documented by the CDC. Just a few years ago, a teacher in a California elementary school had MDR TB and 31 children became infected.

The treatment regimen for drug resistant TB is excessively long and difficult, requiring two years of therapy with old antibiotics with side effects including hearing loss and nerve damage. We will not control the spread of drug resistant TB without the development of a shorter, more tolerable treatment regimen.

This is an opportune moment for an Action Plan. We are seeing strong leadership from countries like South Africa in addressing their own TB epidemics.

The US also has a record of accomplishment on which to build. USAID has achieved impressive gains against TB, and it plays a crucial global leadership role. USAID has expanded treatment for drug resistant TB, as well as helped reduce the price of medication through its contribution to the Global Drug Facility. The US has leveraged progress around the globe through its contribution to the Global Fund,

and PEPFAR has increased services for people living with HIV, to whom TB poses a particularly serious risk. CDC has helped address real gaps in the domestic US response, and NIH is a leader in TB research.

Yet, much more needs to be done to get ahead of this crisis. An Action Plan should have bold targets for scaling up services for addressing drug-resistant TB globally and in the US, while strengthening the response to TB overall. It needs an aggressive research agenda, for vaccines, diagnostics and treatments. And, it must include strong means of independently assessing progress.

Most of all, an Action Plan must be accompanied by the necessary funding and resources required for agencies, including USAID, Global Fund, CDC and the National Institutes of Health to implement the plan, beginning in FY 2017. It is abundantly clear that the existing level of resources is insufficient, to both protect people in the US as well as build country capacity and put us on a path to reach agreed international goals in the End TB Strategy.

We want to thank you for your historic leadership in developing this Action Plan. We encourage you to develop a Plan that is bold and comprehensive, and additionally, to use all diplomatic means available to foster strong leadership to combat TB internationally.

Sincerely,

Aeras
American Thoracic Society
Asian & Pacific Islander American Health Forum (APIAHF)
Friends of the Global Fight
Global Health Council
Infectious Diseases Society of America
International HIV/AIDS Alliance
International Union Against Tuberculosis and Lung Disease
National TB Controllers Association
RESULTS
Stop TB USA
Treatment Action Group
UPMC Center for Health Security

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