

111TH CONGRESS
2^D SESSION

S. RES. 454

Supporting the goals of World Tuberculosis Day to raise awareness about tuberculosis.

IN THE SENATE OF THE UNITED STATES

MARCH 15, 2010

Mr. BROWN of Ohio submitted the following resolution; which was referred to the Committee on Foreign Relations

RESOLUTION

Supporting the goals of World Tuberculosis Day to raise awareness about tuberculosis.

Whereas tuberculosis (TB) is the second leading global infectious disease killer behind HIV/AIDS, claiming 1,800,000 lives each year;

Whereas the global TB pandemic and spread of drug resistant TB present a persistent public health threat to the United States;

Whereas according to 2009 data from the World Health Organization, 5 percent of all new TB cases are drug resistant;

Whereas TB is the leading killer of people with HIV/AIDS;

Whereas TB is the third leading killer of adult women, and the stigma associated with TB disproportionately affects

women, causing them to delay seeking care and interfering with treatment adherence;

Whereas the Institute of Medicine found that the resurgence of TB between 1980 and 1992 was caused by cuts in TB control funding and the spread of HIV/AIDS;

Whereas, although the numbers of TB cases in the United States continue to decline, progress towards TB elimination has slowed, and it is a disease that does not recognize borders;

Whereas an extensively drug resistant strain of TB, known as XDR-TB, is very difficult and expensive to treat and has high and rapid fatality rates, especially among HIV/AIDS patients;

Whereas the United States has had more than 83 cases of XDR-TB over the last decade;

Whereas the Centers for Disease Control and Prevention estimated in 2009 that it costs \$483,000 to treat a single case of XDR-TB;

Whereas African-Americans are 8 times more likely to have TB than Caucasians, and significant disparities exist among other United State minorities, including Native Americans, Asian-Americans, and Hispanic-Americans;

Whereas the United States public health system has the expertise to eliminate TB, but many State TB programs have been left seriously under-resourced due to budget cuts at a time when TB cases are growing more complex to diagnose and treat;

Whereas, although drugs, diagnostics, and vaccines for TB exist, these technologies are antiquated and are increasingly inadequate for controlling the global epidemic;

Whereas the most commonly used TB diagnostic in the world, sputum microscopy, is more than 100 years old and lacks sensitivity to detect TB in most HIV/AIDS patients and in children;

Whereas current tests to detect drug resistance take at least 1 month to complete and faster drug susceptibility tests must be developed to stop the spread of drug resistant TB;

Whereas the TB vaccine, BCG, provides some protection to children, but has little or no efficacy in preventing pulmonary TB in adults;

Whereas there is also a critical need for new TB drugs that can safely be taken concurrently with antiretroviral therapy for HIV;

Whereas the Global Health Initiative commits to reducing TB prevalence by 50 percent;

Whereas enactment of the Lantos-Hyde Global Leadership Against HIV/AIDS, TB, and Malaria Act and the Comprehensive TB Elimination Act provide an historic United States commitment to the global eradication of TB, including to the successful treatment of 4,500,000 new TB patients and 90,000 new multi-drug resistant (MDR) TB cases by 2013, while providing additional treatment through coordinated multilateral efforts;

Whereas the United States Agency for International Development provides financial and technical assistance to nearly 40 highly burdened TB countries and supports the development of new diagnostic and treatment tools, and is authorized to support research to develop new vaccines to combat TB;

Whereas the Centers for Disease Control and Prevention, working in partnership with United States, States, and territories, directs the national TB elimination program and essential national TB surveillance, technical assistance, prevention activities, and supports the development of new diagnostic, treatment, and prevention tools to combat TB;

Whereas the National Institutes of Health, through its many institutes and centers, plays the leading role in basic and clinical research into the identification, treatment, and prevention of TB;

Whereas the Global Fund to Fight AIDS, Tuberculosis, and Malaria provides 63 percent of all international financing for TB programs worldwide and finances proposals worth \$3,200,000,000 in 112 countries, and TB treatment for 6,000,000 people, 1,800,000 HIV/TB services, and in many countries in which the Global Fund supports programs, TB prevalence is declining, as are TB mortality rates; and

Whereas, March 24, 2010, is World Tuberculosis Day, a day that commemorates the date in 1882 when Dr. Robert Koch announced his discovery of *Mycobacterium tuberculosis*, the bacteria that causes tuberculosis: Now, therefore, be it

1 *Resolved*, That the Senate—

2 (1) supports the goals of World Tuberculosis
3 Day to raise awareness about tuberculosis;

4 (2) commends the progress made by anti-tuber-
5 culosis programs, including the United States Agen-
6 cy for International Development, the Centers for

1 Disease Control and Prevention, the National Insti-
2 tutes of Health, and the Global Fund to Fight
3 AIDS, Tuberculosis and Malaria; and

4 (3) reaffirms its commitment to global tuber-
5 culosis control made through the Lantos-Hyde
6 United States Leadership Against HIV/AIDS, Tu-
7 berculosis and Malaria Act of 2008 (Public Law
8 108–25; 117 Stat. 711).

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