

# TUBERCULOSIS

## FACTSHEET



### TB INFECTION AND TRANSMISSION

TB is a contagious disease. Like the common cold, it spreads through the air. When infectious people cough, sneeze, talk, or spit, they propel TB germs (*Mycobacterium tuberculosis*). A person needs only to inhale a small number of these to be infected. Most people infected with TB will never develop active TB disease. However, those with compromised immune systems - the sick, malnourished or people living with HIV/AIDS - are particularly susceptible. Left untreated, each person with active TB disease will infect about 10 to 15 people every year. TB is present in all countries and age groups, but it is curable and preventable.

### TREATMENT

#### FIRST-LINE TB

Directly Observed Treatment Short Course (DOTS) is the WHO recommended therapy for TB control, which uses a combination of different antibiotics over a 6-8 month period. Patients are observed taking their medication to ensure the continued compliance needed for complete eradication of the bacteria. More than 41 million TB patients have been treated under DOTS since 1995.

#### MULTIDRUG- OR RIFAMPICIN-RESISTANT TB (MDR/RR-TB)

MDR/RR-TB is caused by TB bacilli being resistant to at least isoniazid and rifampicin, the two most powerful anti-TB drugs. It emerges through mismanagement of first-line TB medicines. It can also be spread from one person to another. It is a widespread and growing problem, especially in CIS countries, China and India.

#### EXTENSIVELY DRUG-RESISTANT TB (XDR-TB)

XDR-TB occurs when resistance to second-line medication develops, mostly through mismanagement of MDR/RR-TB

treatment, and is extremely difficult to treat. XDR-TB means being resistant to at least isoniazid and rifampicin (MDR), plus at least one of the fluoroquinolones. XDR-TB raises concerns of a future TB epidemic with restricted treatment options that may jeopardise the major gains made in TB control.

#### TB CO-INFECTION HIV/AIDS

HIV and TB form a lethal combination, each speeding up the other's progress. HIV weakens the immune system. Someone who is HIV positive and infected with TB is many times more likely to become sick than someone who is HIV-negative. TB is a leading cause of death among people who are HIV-positive. In Africa, HIV is the single most important factor contributing to the increase in the incidence of TB since 1990.

#### STOP TB PARTNERSHIP AND GDF

The Stop TB Partnership's Global Plan to End TB 2016-2020 is in line with the WHO End TB Strategy and the TB target as set in the Sustainable Development Goals (SDGs). These goals are built around a set of global targets endorsed by world leaders in 2015; SDG 3 includes a target to end the TB epidemic by 2030.

The Global Drug Facility (GDF) ensures access to quality assured anti-TB drugs at the lowest possible price for countries in need. GDF has developed an innovative approach to delivering the drugs and supplies needed to fully implement the Stop TB Strategy, a direct procurement service and expert technical assistance for managing anti-TB drugs. GDF unites these essential services under one umbrella.

### TB FACTS

- A total of 1.4 million people died from tuberculosis (TB) in 2019 (incl. 208 000 people with HIV).
- Worldwide, TB is one of the top 10 causes of death and the leading cause from a single infectious agent.
- In 2019, an estimated 10 million people fell ill with TB worldwide.
- In 2019, 1.2 million children fell ill with TB globally. Child and adolescent TB is often overlooked by health providers and can be difficult to diagnose and treat.
- In 2019, the 30 high TB burden countries accounted for 87% of new TB cases. Eight countries account for two thirds of the total, with India leading the count, followed by Indonesia, China, the Philippines, Pakistan, Nigeria, Bangladesh and South Africa.
- Multidrug-resistant TB (MDR-TB) remains a public health crisis and a health security threat. A global total of 206 030 people with multidrug- or rifampicin-resistant TB (MDR/RR-TB) were detected and notified in 2019, a 10% increase compared to 2018.
- Globally, TB incidence is falling at about 2% per year and between 2015 and 2019 the cumulative reduction was 9%. This was less than half way to the End TB Strategy milestone of 20% reduction between 2015 and 2020.
- An estimated 60 million lives were saved through TB diagnosis and treatment between 2000 and 2019.
- Ending the TB epidemic by 2030 is among the health targets of the United Nations Sustainable Development Goals (SDGs).



Source: WHO Tuberculosis key facts 2020

### SERVICE DESK IDA FOUNDATION

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### IDA FACTS

- Founded in 1972, the Netherlands (headquarters)
- Offices in India, China and Nigeria
- Global network of over 30 agents
- Over 220 employees worldwide
- Over 25 nationalities represented in the IDA Team



# TUBERCULOSIS RELATED PRODUCTS



## First-line single formulations (incl. paediatrics)

1920-002-07	ethambutol HCl 100 mg, blister	100 tabs
1921-010-07	ethambutol HCl 100 mg dispersible, blister	100 tabs
1922-002-23	ethambutol HCl 400 mg, blister	672 tabs
1932-002-07	isoniazid 100 mg, blister	100 tabs
1932-010-07	isoniazid 100 mg dispersible, blister	100 tabs
1934-002-23	isoniazid 300 mg, blister	672 tabs
1959-010-07	pyrazinamide 150 mg dispersible, blister	100 tabs
1961-002-23	pyrazinamide 400 mg, blister	672 tabs
1960-002-23	pyrazinamide 500 mg, blister	672 tabs
5050-002-34	rifabutin 150 mg, blister	100 caps
5060-002-31	rifampicin 150 mg, blister	100 caps
5062-002-31	rifampicin 300 mg, blister	100 caps
5062-002-07	rifampicin 300 mg, blister	100 tabs
5049-002-A6	rifapentine 150 mg, blister	24 tabs
1959-010-10	pyrazinamide 150 mg, dispersible	100 tabs

## First-line FDC (fixed dose combinations) (incl. paediatrics)

5065-010-73	rifampicin 75 mg + isoniazid 50 mg, dispersible, blister	84 tabs
5066-330-73	rifampicin 75 mg + isoniazid 50 mg + pyrazinamide 150 mg, dispersible, blister	84 tabs
5064-002-AV	rifampicin 150 mg + isoniazid 75 mg, blister	336 tabs
5064-002-23	rifampicin 150 mg + isoniazid 75 mg, blister	672 tabs
5054-TB2-23	rifampicin 150 mg + isoniazid 75 mg + ethambutol 275 mg, blister	672 tabs
5055-TB2-AV	rifampicin 150 mg + isoniazid 75 mg + pyrazinamide 400 mg + ethambutol 275 mg, blister	336 tabs
5055-TB2-23	rifampicin 150 mg + isoniazid 75 mg + pyrazinamide 400 mg + ethambutol 275 mg, blister	672 tabs
5059-002-BT	rifapentine 300 mg + isoniazid 300 mg, blister	36 tabs

## Second-line and third-line single formulations (incl. paediatrics)

5039-002-20	amikacin 500 mg/2 ml, injection	100 amps
1971-002-04	bedaquiline 20 mg	60 tabs
1970-002-N2	bedaquiline 100 mg	188 tabs
2009-002-34	clofazimine 50 mg	100 caps
2009-002-07	clofazimine 50 mg, blister	100 tabs
2010-002-34	clofazimine 100 mg	100 caps

## Second-line and third-line single formulations (incl. paediatrics) - cont.

2010-002-07	clofazimine 100 mg, blister	100 tabs
1949-002-31	cycloserine 125 mg, blister	100 caps
1950-002-31	cycloserine 250 mg, blister	100 caps
1975-002-23	delamanid 50 mg, blister	672 tabs
1928-010-07	ethionamide 125 mg dispersible, blister	100 tabs
1925-002-07	ethionamide 250 mg, blister	100 tabs
4705-003-16	imipenem / cilastatin 500 mg + 500 mg, powder for inf	10 vials
5048-010-07	levofloxacin 100 mg dispersible, blister	100 tabs
5041-002-07	levofloxacin 250 mg, blister	100 tabs
5042-002-07	levofloxacin 500 mg, blister	100 tabs
5047-002-07	levofloxacin 750 mg, blister	100 tabs
5089-002-07	linezolid 600 mg, blister	100 tabs
4707-019-16	meropenem 1g injectable powder for solution for IV	10 vials
5045-010-07	moxifloxacin 100 mg dispersible, blister	100 tabs
5046-002-07	moxifloxacin 400 mg, blister	100 tabs
5073-004-H3	PAS sodium eq. to 4 g PAS, powder for oral sol	25 sacs
5056-002-BN	pretomanid 200 mg	26 tabs
1926-002-07	prothionamide 250 mg, blister	100 tabs
5075-002-A3	streptomycin 1 g, powder for inj	100 vials
1910-002-31	terizidone 250 mg, blister	100 caps
6872-002-61	water for injection, 5 ml	50 amps
6872-002-18	water for injection, 5 ml	100 amps

## TB related medicines

4729-AC1-07	amoxicillin 500 mg + clavulanic acid 125 mg, blister	100 tabs
6272-VB6-67	vitamin B-6 50 mg (pyridoxine HCl), blister	50 tabs
6274-VB6-Z3	vitamin B-6 100 mg (pyridoxine HCl)	250 tabs

## Medical supplies

N706-N01-01	syringe, autodisable 5 ml with needle 21G x 1-1/2"	100 pces
N706-N54-01	syringe, autodisable 5 ml with needle 22G x 1-1/2"	100 pces
N706-N02-01	syringe, autodisable 5 ml with needle 23G x 1"	100 pces
E959-TY2-00	SMC Smart medication container kit	1 pce
E959-TY1-00	SMM Smart medication module kit	1 pce
KT01-001-02	Stop TB Patient Kit CAT I & III KIT A	1 kit

## UNITED NATIONS SUSTAINABLE DEVELOPMENT GOALS (SDGS)

SDG 3 - GLOBAL HEALTH AND WELL BEING INCLUDES ENDING THE TB EPIDEMIC BY 2030, BY PROVIDING A UNIFIED RESPONSE TO ENDING TB DEATHS, DISEASE, AND SUFFERING.



## IDA FOUNDATION AND TUBERCULOSIS

IDA is the awarded procurement agent for the Stop TB Partnership / Global Drug Facility. In this role, IDA supplies First- and Second-line anti-TB medicines to over 100 countries. We are fully responsible for the procurement, quality control coordination and consultancy, and the full supply chain until final delivery.

IDA supplies to a broad range of customers; from large national TB programmes in countries like Pakistan, India, the Philippines, Congo and Ukraine, to small-scale TB projects.

On behalf of GDF, IDA also manages the Strategic Rotating Stockpile (SRS). The SRS, with a value of USD 30 million, allows us to substantially reduce lead times and supply quickly in case of emergency orders.

## IDA TB PRODUCT RANGE

- First-line TB medicines
- Second- / third-line TB medicines
- Laboratory equipment
- Complete HIV/AIDS product range for patients with a co-infection of TB and HIV/ AIDS

This also includes the newer FLD and SLD paediatric formulations and SLD products bedaquiline and delamanid.

