

Important Updates on Tuberculosis Control

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DESCRIPTION

Tuberculosis (TB) remains a global public health concern, despite significant progress in recent years. The ongoing battle against this ancient disease continues to demand concerted efforts and innovative strategies from the global health community. In this article, we will explore important updates on TB control, including advancements in diagnostics, treatment, prevention, and the challenges that persist.

Diagnostics advancements

Rapid molecular testing: One of the most significant updates in TB control is the widespread adoption of rapid molecular testing methods. Tests like GeneXpert, which detects *Mycobacterium tuberculosis* (the bacterium causing TB) and drug resistance within hours, have revolutionized TB diagnosis. These tests are particularly critical in regions with a high burden of TB and drug-resistant TB, enabling early detection and timely initiation of appropriate treatment.

Artificial Intelligence (AI) in TB diagnosis: AI is making its mark in TB diagnostics. Machine learning algorithms, trained on vast datasets of chest X-rays and other medical imaging, can assist in the early detection of TB. These AI-driven tools help radiologists and healthcare providers identify TB-related abnormalities in chest images more accurately and swiftly, further improving diagnosis rates.

Treatment advancements

Shorter treatment regimens: Traditional TB treatment regimens are long and complex, requiring patients to take multiple drugs for several months. Recent research has led to the development of shorter treatment options, such as the 4-month regimen for drug-sensitive TB. These regimens are more patient-friendly, reducing the burden of treatment and potentially improving adherence.

Bedaquiline and Delamanid: Two novel drugs, Bedaquiline and Delamanid, have been approved for the treatment of Multi Drug-Resistant TB (MDR-TB) and Extensively Drug-Resistant TB (XDR-TB). These medications offer hope to patients with drug-

resistant TB strains, as they have demonstrated higher cure rates and reduced treatment duration compared to conventional therapies. Wider access to these drugs is a significant step forward in TB control.

Prevention advancements

Preventive therapy: Tuberculosis Preventive Therapy (TPT) is becoming a important component of TB control efforts, particularly for individuals at high risk of developing active TB, such as those with Latent TB Infection (LTBI) or people living with HIV. Short-course TPT regimens, like the 3-month course of Isoniazid and Rifapentine, have demonstrated efficacy in preventing TB disease, making TB prevention more accessible and effective.

New TB vaccines: The development of new TB vaccines is a top priority in the fight against TB. The Bacillus Calmette-Guérin (BCG) vaccine, although effective in preventing severe forms of TB in children, does not provide lifelong protection against pulmonary TB. Recent research has led to promising vaccine candidates in various stages of clinical trials. These new vaccines aim to enhance protection and reduce the global burden of TB.

Challenges and persisting issues

Drug-resistant TB: The rise of drug-resistant TB strains, particularly MDR-TB and XDR-TB, remains a major challenge. These strains are more challenging and costly to treat, and they threaten to reverse the progress made in TB control. Ensuring access to novel drugs like Bedaquiline and Delamanid and improving laboratory infrastructure for drug susceptibility testing are critical steps in addressing this issue.

Funding gaps: Funding for TB control efforts is still insufficient, hindering the implementation of comprehensive TB programs worldwide. Investments in research and development, healthcare infrastructure, and the procurement of essential drugs and diagnostics are essential to combat this global health threat effectively.

Vulnerable populations: TB disproportionately affects vulnerable populations, including those living in poverty, people

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Received: 02-Jun-2023, Manuscript No. MDTL-23-27291; Editor assigned: 05-Jun-2023, Pre QC No. MDTL-23-27291 (PQ); Reviewed: 19-Jun-2023, QC No. MDTL-23-27291; Revised: 26-Jun-2023, Manuscript No. MDTL-23-27291 (R); Published: 03-Jul-2023, DOI: 10.35248/2161-1068.23.13.360.

Citation: Ben R (2023) Important Updates on Tuberculosis Control. Mycobact Dis.13:360.

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with HIV, and marginalized communities. Addressing the social determinants of TB, such as inadequate housing and limited access to healthcare, is vital to achieving equitable TB control.

TB-HIV co-infection: Tuberculosis-HIV co-infection remains a critical concern, as TB is a leading cause of death among people living with HIV. Coordinated efforts to integrate TB and HIV services are essential to ensure that individuals with both infections receive comprehensive care and treatment.

Stigma and discrimination: Stigma and discrimination associated with TB persist in many communities, discouraging individuals from seeking care and adhering to treatment. Public health campaigns and community engagement efforts are crucial to dispel myths and reduce the social barriers surrounding TB.

CONCLUSION

While significant advancements have been made in the field of TB control, important challenges persist. The development and

adoption of rapid diagnostics, shorter treatment regimens, and novel drugs offer hope for improved patient outcomes. Tuberculosis prevention, including preventive therapy and new vaccines, is gaining momentum, providing opportunities to reduce the global burden of TB. However, addressing drugresistant TB, securing adequate funding, reaching vulnerable populations, addressing TB-HIV co-infection, and combating stigma remain crucial priorities. TB control requires a multifaceted, collaborative effort at the global, national, and community levels. With continued commitment and innovation, we have the potential to strive for a global where TB is no longer a major global health threat.