

ENDING TB

Relevant for: Health, Education & Human Resources | Topic: Health & Sanitation and related issues

After decades spent battling the scourge of tuberculosis (TB) in developing countries, 2018 might be the year that it is finally accorded the gravitas it deserves. On September 26, the UN General Assembly will, for the first time, address TB in a High-Level Meeting and likely release a Political Declaration, endorsed by all member nations, to galvanise investment and action to meet the global target of eliminating TB worldwide by 2035.

Elimination, which means reducing the number to one case per million people per year, will be impossible without universal, equitable access to affordable, quality TB diagnostics and treatment for anyone who needs it. Much to the disappointment of global civil society, issues around access to diagnostics and drugs have been considerably diluted in the most recent draft of the Political Declaration.

A critical omission is that countries may avail of the various flexibilities under the Trade-Related Aspects of Intellectual Property Rights; another is that countries may invoke the Doha Declaration to compulsorily license drugs for use in public health emergencies. Yet another is the option to de-link the pricing of new TB drugs from the costs incurred in their research and development. The latest draft is a watered-down version of the original that actively committed to upholding access to affordable generics for all.

India has fought to retain its status as a maker and distributor of generic medicines, thereby protecting the right to health of people in developing countries. Indian patent law contains important provisions that help protect and promote public health goals — for example, by overcoming bids by big pharma to evergreen patents of old drugs, through compulsorily licensing for certain drugs, and by permitting pre- and post-grant opposition to patents to challenge unfair patenting practices by big pharma.

TB is, by and large, easily diagnosable and curable. It is unacceptable that it nevertheless remains the leading causes of death from any single infectious agent worldwide. Each day, thousands of people with TB die, often because of inequitable access to quality diagnosis and treatment. In addition, the rapid emergence of drug-resistant forms of TB (DR-TB) in many countries brings a fresh set of needs including new and comprehensive diagnostic tests and second-line TB drugs, and health systems trained anew to manage DR-TB. India not only accounts for a fifth of the world's TB burden, it also has the largest number of people living with multidrug-resistant TB. In March, Prime Minister Narendra Modi said India would eliminate TB by 2025, ahead of the global targets. These targets cannot be achieved without access to affordable, quality diagnostics/ drugs. Unless India assumes a leadership role to restore every possible option to protect universal access to TB drugs in the Political Declaration, 2018 may end up being just another brick in the wall.

The writers are public health professionals

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