

Fact sheet Copenhagen, 19 March 2013

Figures talk: tuberculosis (TB) in the WHO European Region¹

"TB is everywhere, and its treatment and care must be so, too"

TB: still too early to be complacent

380 000 new TB cases are estimated to occur in a year. The WHO European Region has an estimated total of over **500 000** TB patients.

TB is an infectious disease that usually affects the lungs, but can attack other parts of the body. It spreads from one person to another when they breathe the same air. One third of the world's population is infected with *Mycobacterium tuberculosis*, which causes TB; and one tenth of the people infected become sick with the disease during their lifetime. TB ranks as the second leading cause of death from infectious diseases worldwide, after HIV/AIDS.

TB continues to claim victims

TB causes **44 000** deaths yearly in the WHO European Region, the vast majority in eastern and central parts of the Region².

Death can be the unfortunate outcome of a disease that is an emotional and physical drain for patients and their families. Common symptoms in pulmonary TB include chronic cough with blood-tinged sputum, shortness of breath and chest pain, as well as fever, night sweats, loss of weight and weakness. The disease requires six months' to two years' treatment for effective control, and side-effects are heavy. People with TB often suffer from discrimination and stigma, rejection and social isolation.

Drug-resistant TB (M/XDR-TB) creates the highest burden

78 000 individuals are estimated to fall sick with drug-resistant TB (M/XDR-TB) yearly.

Multidrug- and extensively drug-resistant TB (MDR- and XDR-TB) are forms of the disease that are resistant to the most potent anti-TB drugs. M/XDR-TB arises from the improper use of antibiotics in the treatment of normal TB. This happens for many reasons, including the administration of improper or inadequate treatment regimens and lack of support for patients to ensure they finish the whole course of treatment. A patient who develops active disease with a drug-resistant TB strain can transmit this form of TB to other individuals. In some settings, over a third of new TB cases and over half of previously treated patients suffer from M/XDR-TB.

M/XDR-TB is more difficult to diagnose and treat

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Data refer to 2011.

²The WHO European Region comprises 53 countries, with a population of nearly 900 million people.

On average fewer than 50% of MDR-TB patients are successfully treated. M/XDR-TB has more side-effects and is more lengthy and costly to treat than normal TB.

Only **30 000** MDR-TB patients were diagnosed in 2011, owing to limited access to diagnosis. Testing for resistance to second-line drugs³ almost doubled compared to the previous year, but it is still only at the level of **11% of** MDR-TB cases. Such testing is the key to administering appropriate treatment and measuring the trends in resistance.

The WHO European Region is a gravity centre for M/XDR-TB

87% of TB cases are found in the 18 high-priority countries⁴ for TB control in the eastern part of the European Region. They report almost **8** times more TB cases than the rest of the Region. Overall, however, TB is declining at a rate of **5%** per year.

With over **half** of the world's countries with the highest percentage of M/XDR-TB cases, the European Region is a gravity centre for M/XDR-TB. The main efforts to combat and prevent TB remain focused here, to prevent the global spread of the deadly resistant TB strains. Within western Europe, particularly in big cities, TB requires continuous attention.

TB and M/XDR-TB can affect everyone but are mainly linked to social determinants

11 000 children under 15 years of age are reported to have TB every year, despite the difficulties in diagnosing TB in children. In western Europe, about **40%** of the children who fall sick with TB are under 5 years of age.

TB is seen most frequently among young adults in the eastern part of Europe, and among migrants and the elderly native population in the western part. TB is particularly linked to social determinants of health, such as migration, imprisonment and social marginalization.

TB is a leading killer among people living with HIV/AIDS

People co-infected with TB and HIV are up to 34 times more likely to develop active TB disease than those without HIV. Fewer than 13 000 TB cases with HIV co-infection were detected in the Region in 2011, or 56.5% of the estimated total. Only 70% of these were offered antiretroviral treatment.

TB further weakens the immune system of people living with HIV and AIDS who are already compromised.

WHO boosts action to respond to the TB threat

The WHO Regional Office for Europe developed a 5-year consolidated action plan on M/XDR-TB, which was endorsed by all the Member States of the WHO European Region in 2011.

The action plan aims to contain the spread of drug-resistant TB by achieving universal access to prevention, diagnosis and treatment of M/XDR-TB in all countries of the Region by 2015. The goal is to decrease by 20 percentage points the proportion of cases of M/XDR-TB among previously treated cases, to detect 85% of estimated M/XDR-TB patients and successfully to treat at least 75% of them.

Further information

³ Second-line drugs are more expensive antibiotics that need to be used to treat resistant TB strains.

⁴ Armenia, Azerbaijan, Belarus, Bulgaria, Estonia, Georgia, Kazakhstan, Kyrgyzstan, Latvia, Lithuania, Republic of Moldova, Romania, Russian Federation, Tajikistan, Turkey, Turkmenistan, Ukraine and Uzbekistan.

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