

# THE LANCET

## **Supplementary appendix**

This appendix formed part of the original submission and has been peer reviewed. We post it as supplied by the authors.

Supplement to: Uplekar M, Weil D, Lonroth K, et al, for WHO's Global TB Programme. WHO's new End TB Strategy. *Lancet* 2015; published online March 24. [http://dx.doi.org/10.1016/S0140-6736\(15\)60570-0](http://dx.doi.org/10.1016/S0140-6736(15)60570-0).

## PANEL 1: THE END TB STRATEGY 2016-2035

<b>VISION</b>	<b>A world free of tuberculosis</b> – zero deaths, disease and suffering due to tuberculosis			
<b>GOAL</b>	<b>End the global tuberculosis epidemic</b>			
<b>INDICATORS</b>	<b>MILESTONES</b>		<b>TARGETS</b>	
	<b>2020</b>	<b>2025</b>	<b>2030*</b>	<b>2035</b>
Reduction in number of TB deaths compared with 2015 (%)	<b>35%</b>	<b>75%</b>	<b>90%</b>	<b>95%</b>
Reduction in TB incidence rate compared with 2015 (%)	<b>20%</b> ( <b>&lt;85/100 000</b> )	<b>50%</b> ( <b>&lt;55/100 000</b> )	<b>80%</b> ( <b>&lt;20/100 000</b> )	<b>90%</b> ( <b>&lt;10/100 000</b> )
TB-affected families facing catastrophic costs due to TB (%)	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>PRINCIPLES</b>				
<ol style="list-style-type: none"> <li>1. <i>Government stewardship and accountability, with monitoring and evaluation</i></li> <li>2. <i>Strong coalition with civil society organizations and communities</i></li> <li>3. <i>Protection and promotion of human rights, ethics and equity</i></li> <li>4. <i>Adaptation of the strategy and targets at country level, with global collaboration</i></li> </ol>				
<b>PILLARS AND COMPONENTS</b>				
<b>1. INTEGRATED, PATIENT-CENTRED CARE AND PREVENTION</b> <ol style="list-style-type: none"> <li>A. Early diagnosis of tuberculosis including universal drug-susceptibility testing, and systematic screening of contacts and high-risk groups</li> <li>B. Treatment of all people with tuberculosis including drug-resistant tuberculosis, and patient support</li> <li>C. Collaborative tuberculosis/HIV activities, and management of co-morbidities</li> <li>D. Preventive treatment of persons at high risk, and vaccination against tuberculosis</li> </ol>				
<b>2. BOLD POLICIES AND SUPPORTIVE SYSTEMS</b> <ol style="list-style-type: none"> <li>A. Political commitment with adequate resources for tuberculosis care and prevention</li> <li>B. Engagement of communities, civil society organizations, and public and private care providers</li> <li>C. Universal health coverage policy, and regulatory frameworks for case notification, vital registration, quality and rational use of medicines, and infection control</li> <li>D. Social protection, poverty alleviation and actions on other determinants of tuberculosis</li> </ol>				
<b>3. INTENSIFIED RESEARCH AND INNOVATION</b> <ol style="list-style-type: none"> <li>A. Discovery, development and rapid uptake of new tools, interventions and strategies</li> <li>B. Research to optimize implementation and impact, and promote innovations</li> </ol>				

\* Targets for the United Nations “Sustainable Development Goals” under formulation

**Panel 2. Top-ten priority indicators (not ranked) for monitoring and implementation of the End TB Strategy at global and national levels, with recommended target levels that are applicable to all countries**

	<b>Indicator</b>	<b>Recommended target level*</b>	<b>Main rationale for inclusion in top-ten</b>
1	<p><b>TB treatment coverage</b>  <i>Number of new and relapse cases that were notified and treated, divided by the estimated number of incident TB cases in the same year, expressed as a percentage</i></p>	≥90%	<p>High-quality TB care is essential to prevent suffering and death from TB and to cut transmission. High coverage of appropriate treatment is a fundamental requirement for achieving the milestones and targets of the End TB Strategy. In combination, it is likely that these two indicators will be used for monitoring progress towards universal health coverage (UHC) within the post-2015 Sustainable Development Goals (SDGs).</p>
2	<p><b>TB treatment success rate</b>  <i>Percentage of notified TB patients who were successfully treated. The target is for drug-susceptible and drug-resistant TB combined, although outcomes should also be reported separately.</i></p>	≥90%	
3	<p><b>Percentage of TB-affected households that experience catastrophic costs due to TB</b>  <i>Number of people treated for TB (and their households) who incur catastrophic costs (direct and indirect combined), divided by the total number of people treated for TB.</i></p>	0%	<p>One of the End TB Strategy’s three high-level indicators; key marker of financial risk protection and progress towards UHC and social protection for TB-affected households.</p>
4	<p><b>Percentage of newly notified TB patients diagnosed using WHO-recommended rapid tests</b>  <i>Number of newly notified TB patients diagnosed with WHO-recommended rapid tests, divided by the total number of newly notified TB patient.</i></p>	≥90%	<p>Accurate diagnosis is a fundamental component of TB care. Rapid tests help to ensure early detection and prompt treatment.</p>
5	<p><b>LTBI treatment coverage</b>  <i>Sum of the number of people living with HIV newly enrolled in HIV care and the number of children who are contacts of cases started on LTBI treatment, divided by the number eligible for treatment, expressed as a percentage</i></p>	≥90%	<p>Treatment for latent TB infection (LTBI) is the main treatment intervention available to prevent development of active TB disease in those already infected with <i>M. tuberculosis</i>.</p>
6	<p><b>Contact investigation coverage</b>  <i>Number of contacts of people with bacteriologically-confirmed TB who were investigated for TB divided by the number eligible, expressed as a percentage</i></p>	≥90%	<p>Contact investigation is a key component of early TB detection and TB prevention, especially in children.</p>
7	<p><b>DST coverage for TB patients</b>  <i>Number of TB patients with DST results divided by the number of notified cases in the same year, expressed as a percentage. DST coverage includes results from molecular (e.g. Xpert MTB/RIF) as well as conventional phenotypic DST results.</i></p>	100%	<p>Drug susceptibility testing (DST) is essential to provide the right treatment for every person diagnosed with TB.</p>
8	<p><b>Treatment coverage, new TB drugs</b>  <i>Number of TB patients treated with regimens that include new TB drugs, divided by the number of notified patients eligible for treatment with new TB drugs, expressed as a percentage</i></p>	≥90%	<p>An indicator that is relevant to monitoring the adoption of innovations in all countries. <i>NB. Indicators related to the development of new tools are needed at global level but are not appropriate for monitoring progress in all countries.</i></p>
9	<p><b>Documentation of HIV status among TB patients</b>  <i>Number of new and relapse TB patients with documented HIV status divided by the number of new and relapse TB patients notified in the same year, expressed as a percentage</i></p>	100%	<p>One of the core global indicators used to monitor collaborative TB/HIV activities. Documentation of HIV status is essential to provide the best care for HIV-positive TB patients, including anti-retroviral treatment (ART)</p>
10	<p><b>Case fatality ratio (CFR)</b>  <i>Number of TB deaths (from a national VR system)divided by estimated number of incident cases in the same years, expressed as a percentage</i></p>	≤5%	<p>This is a key indicator for monitoring progress towards 2020 and 2025 milestones. A CFR of 6% is required to achieve the 2025 global milestone for reductions in TB deaths and cases.</p>

\*target level to be reached by 2025 at the latest.