

113TH CONGRESS
1ST SESSION

H. RES. 133

Commending the progress made by anti-tuberculosis programs.

IN THE HOUSE OF REPRESENTATIVES

MARCH 21, 2013

Mr. ENGEL (for himself, Mr. YOUNG of Alaska, Mr. GENE GREEN of Texas, Ms. SCHAKOWSKY, Mr. LEVIN, Mr. SMITH of Washington, Mr. HONDA, Mrs. CAROLYN B. MALONEY of New York, Ms. LEE of California, Mr. PAYNE, Ms. ROYBAL-ALLARD, Mr. HASTINGS of Florida, and Ms. LOFGREN) submitted the following resolution; which was referred to the Committee on Foreign Affairs, and in addition to the Committee on Energy and Commerce, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

RESOLUTION

Commending the progress made by anti-tuberculosis
programs.

Whereas tuberculosis (TB) is the second leading fatal global infectious disease behind HIV/AIDS, claiming 3 people each minute and 1,400,000 lives each year;

Whereas the global TB pandemic and the spread of drug-resistant TB present a persistent public health threat to the United States, and cases of drug-resistant TB in the United States have increased;

Whereas TB treatment is long and arduous, ranging from 6 months to 2 years, and requires multiple medications,

and the side effects of treatment for drug-resistant TB can include acute pain and hearing loss;

Whereas periodic TB drug shortages have occurred in many countries, including the United States, because of insufficient production by manufacturers and supply chain problems;

Whereas the first new drug to treat TB in the last 40 years was approved by the FDA in January 2013;

Whereas diabetic patients are 3 times more likely to develop TB compared to those without diabetes;

Whereas TB is the leading killer of people with HIV/AIDS in the developing world, more than 1,000 people infected with HIV die every day from tuberculosis, and there is also a critical need for new TB drugs that can safely be taken concurrently with antiretroviral therapy for HIV;

Whereas health care workers are 2 to 3 times more likely to contract TB than the general population, yet protection from infection is inadequate in many countries;

Whereas TB is an under-recognized problem in children and current pediatric treatments and diagnostics are inadequate;

Whereas the disease can have devastating long-term health effects including deafness, blindness, and paralysis, even after cure;

Whereas TB is the third leading killer of adult women, and the stigma associated with TB disproportionately affects women, often causing delays in seeking care and interfering with treatment adherence;

Whereas breadwinners who become ill with TB are often too sick to work for weeks or months, which can lead to financial catastrophe for their families;

Whereas the Institute of Medicine (IOM) found that the resurgence of TB in the United States between 1985 and 1992 was caused by cuts in TB control funding and the spread of HIV/AIDS;

Whereas the numbers of TB cases in the United States continue to decline;

Whereas drug-resistant TB that appears resistant to all medication has been found in India and South Africa, and the United States has had more than 28 cases of Extensively Drug-Resistant TB (XDR-TB) over the last decade, with 6 cases in 2011 alone;

Whereas there are indications that drugs sold over the counter in pharmacies in several countries with poor national drug control systems may be fake or sub-standard;

Whereas African-Americans are 8 times more likely to have TB than Caucasians, and significant disparities exist among other minorities in the United States, including Native Americans, Asian-Americans, and Hispanic-Americans;

Whereas although drugs, diagnostics, and vaccines for TB exist, many are antiquated and are increasingly inadequate for controlling the global epidemic;

Whereas the TB vaccine, BCG, provides some protection to children, but it has little or no efficacy in adults;

Whereas progress has been made in vaccine research, with more than a dozen vaccine candidates in clinical trials;

Whereas enactment of the Tom Lantos and Henry J. Hyde United States Global Leadership Against HIV/AIDS, Tuberculosis, and Malaria Reauthorization Act of 2008 and the Comprehensive TB Elimination Act provided a historic United States commitment to the global eradication of TB, leading to the successful treatment of 4,500,000 new TB patients and 90,000 new multi-drug-resistant cases by 2013, while providing additional treatment through coordinated multilateral efforts;

Whereas an estimated 20,000,000 people are alive today as a direct result of TB programs;

Whereas a new, United States-developed diagnostic technology, called Xpert, is revolutionizing the TB response;

Whereas TB-related deaths among people living with HIV in Africa have declined by 28 percent since 2004;

Whereas the United States Agency for International Development (USAID) provides financial and technical assistance to nearly 32 highly burdened TB countries, supports the development of new diagnostic and treatment tools, and is authorized to support research to develop new vaccines to combat TB;

Whereas the Centers for Disease Control and Prevention (CDC), working in partnership with States and territories of the United States, directs the national TB elimination program and essential national TB surveillance, technical assistance, and prevention activities and supports the development of new diagnostic, treatment, and prevention tools to combat TB;

Whereas the United States President's Emergency Plan for AIDS Relief (PEPFAR) supports programs to integrate the prevention, diagnosis, and treatment of TB into HIV

services, as well as programs to integrate HIV prevention, testing, care, and treatment into TB programs;

Whereas the National Institutes of Health, through its many institutes and centers, plays the leading role in basic and clinical research into the identification, treatment, and prevention of TB;

Whereas the Global Fund to Fight AIDS, Tuberculosis, and Malaria provides 90 percent of all international financing for TB programs worldwide and has supported the detection and treatment of 9,700,000 cases of TB; and

Whereas March 24, 2013, is World Tuberculosis Day, commemorating the date in 1882 when Dr. Robert Koch announced his discovery of *Mycobacterium tuberculosis*, the bacteria that causes tuberculosis: Now, therefore, be it

1 *Resolved*, That the House of Representatives—

2 (1) supports the goals of World Tuberculosis
3 Day to raise awareness about tuberculosis;

4 (2) commends the progress made by United
5 States-led anti-tuberculosis programs; and

6 (3) reaffirms its commitment to global tuberculosis control made through the Tom Lantos and
7 Henry J. Hyde United States Global Leadership
8 Against HIV/AIDS, Tuberculosis, and Malaria Re-
9 authorization Act of 2008.
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