

24 March 2013 – Pakistan is observing World TB Day along with the global community with a view to building public awareness about the global epidemic of TB and efforts to eliminate the disease. Currently, TB causes the deaths of about 1.7 million people each year, mostly in developing countries.

Holding World TB Day on 24 March commemorates the day in 1882 when Dr Robert Koch discovered the TB bacillus *Mycobacterium tuberculosis* that causes the disease. The discovery opened the way to diagnosing and curing TB.

"Stop TB in My Lifetime" is the slogan for this year's World TB Day encompassing the ambitions of all governments, health care professionals, civil society organizations and health development partners involved in TB care, and pointing to the ultimate target of global TB elimination by the year 2050.

In a message on the occasion, Dr Ala Alwan, WHO Regional Director for the Eastern Mediterranean, pointed out that the global health community has come a long way in its struggle against TB, and achieved appreciable progress in meeting global targets to prevent and control TB during recent years. Yet in 2011, there were more than 8.7 million new cases of TB and 1.4 million people died because of it, indicating that the global fight against TB is far from over.

Dr Alwan noted that the Region is particularly vulnerable to complex emergency situations with several countries experiencing conflict, natural disasters and unstable security conditions, making TB care more complex and challenging. He stressed that many countries in the Region have the potential to achieve TB elimination and become role models for the rest of the world; however, progress towards this goal is slow.

He emphasized that WHO is at the forefront of the regional struggle against TB. WHO teams in regional and country offices play an instrumental role in building the capacities of national TB control programmes, developing strategic interventions, helping secure funds and creating partnerships. In 2012, WHO focused on strengthening diagnosis, enhancing the contribution of the private health sector in TB case detection, scaling-up national expertise and services for multidrug-resistant tuberculosis (MDR-TB) and developing guidance on TB elimination and delivery of TB care in complex emergencies. Dr Alwan called for speedy efforts to end the suffering of the 1 million TB patients in this Region, while extending care to the rising number of

MDR-TB patients.

Dr Ni'ma Saeed Abid, WHO Representative in Pakistan *ad interim*, highlighted the fact the TB is essentially a disease of poverty and that any investment in the control of the disease will lead to the overall economic development of the country. TB is a major cause of morbidity and mortality in the country and is among the top three causes of death for women of child-bearing age. The high prevalence of MDR-TB in Pakistan is another cause for concern and WHO has been facilitating a drug resistance survey to estimate the exact burden of the problem. He noted that tobacco use greatly increases the risk of TB disease and death and that more than 20% of TB cases worldwide are attributable to smoking, constituting an important rationale for enforcing anti-tobacco legislation in the country.

Dr Abid pointed out that WHO was pursuing its six core functions in Pakistan including:

- providing technical leadership on matters critical to TB
- developing evidence-based policies, strategies and standards for TB prevention, care and control
- providing technical support to catalyse change and build sustainable capacity
- measuring progress in TB care, control and financing
- shaping the TB research agenda and stimulating the production, translation and dissemination of valuable knowledge
- fostering effective partnerships for TB action.

He highlighted that WHO was facilitating the technical support of the Institute of Tropical Medicine in Belgium to act a supranational laboratory for TB control in Pakistan.

Dr Ghulam Nabi Kazi, WHO Pakistan's National Professional Officer for TB Control, lauded the successes of national and provincial mechanisms for TB control that have lead to a case detection rate of 69% for all type of TB cases and 64% for smear-positive cases, and a treatment success rate of 92%. However, TB action still has to be scaled-up to meet the growing challenges of both simple TB and MDR-TB.

Dr Kazi stated that WHO estimates a prevalence of 350 cases/100 000 and an incidence of 231/100 000 population translating into 620 000 prevalent cases and 410 000 new cases appearing every year of all types of TB in a population of 177 million. The soon to be released

results of the prevalence survey, an incidence study using the capture-recapture method and the drug prevalence survey will outline the exact proportions of the burden.

He pointed out that successive governments at federal and provincial level have shown great commitment for the cause of TB control ever since it was declared a national emergency on 24 March 2001 by the federal government. This has been reflected in the 5800 TB management units that have been designated countrywide to provide diagnostic and treatment services free of charge. Similarly, 12 tertiary care institutions and teaching hospitals are currently providing MDR-TB services.

Dr Kazi noted that since devolution, provincial development working parties in Khyber-Pakhtunkhwa, Punjab and Sindh had approved their respective provincial PC-Is. However, the PC-I in Sindh is awaiting the completion of procedural formalities, and those in Khyber-Pakhtunkhwa and Punjab are awaiting Central Development Working Party (CDWP) approval. In Balochistan, the PC-I is currently under preparation. It is critical that provincial PC-Is are approved on time so that governments can provide at least the core essential components of the programme such as first line anti-TB drugs and to avoid stock-outs. This would also reduce dependence on external agencies such as the Global Fund to Fight AIDS, Tuberculosis and Malaria, bring about better programme sustainability and restore the confidence of development partners.

Dr Kazi concluded by quoting WHO Director-General Dr Margaret Chan who stated earlier this week that “we have gained a lot of ground in TB, but it can easily be lost if we do not act now.”

[Regional Director's message on World TB Day 2013](#)

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