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## Doing something about tuberculosis

And the pity, nay the horror of it all, is that the backsliding is most noticeable precisely where militant activity should be most conspicuous.<sup>1</sup>

In Tolkien's fantasy epic *Lord of the Rings* Bilbo Baggins disappeared in a flash of light at his 111th birthday party and was never seen in his home village again. Sadly, 111 years after Robert Koch's discovery of its cause in 1882, tuberculosis was showing no signs of disappearing. On the contrary, it was so prevalent in 1993 that the World Health Organisation felt obliged to take the unprecedented step of declaring this disease a global emergency.<sup>2</sup> To many people this declaration must have come as a great surprise. Tuberculosis was supposed to be "conquered"—the sanatoriums of yesteryear had been abandoned; milk was safe to drink; children had been given BCG vaccination since the 1950s; and, when a case did occur, highly effective drugs were available. In one sense these people are right: despite a 20% increase in incidence over the past decade, tuberculosis is very uncommon in the United Kingdom, with only 6000 cases annually in a population of over 50 million. The phenomenal success in controlling tuberculosis in the developed world has, however, blinded us to the fact that, worldwide, tuberculosis causes 1 in 4 preventable adult deaths. Ninety five per cent of the 8 million new cases each year and 98% of the 3 million deaths due to tuberculosis occur in the developing nations.

A major contributing factor to the global indifference is that tuberculosis is predominantly a disease of the poor and destitute. Such indifference is no new phenomenon: in 1908 Leonard Williams castigated his fellow medical practitioners for their complacency and backsliding in dealing with tuberculosis, stating, "The crusade against consumption may be said to have degenerated into a pious opinion that the (tubercle) bacillus resembles the socialist in being a very wicked and obtrusive person whose existence it is well that people of refinement should forget."<sup>1</sup> How true that is 90 years later.

One excuse for indifference is the belief that tuberculosis is now primarily a social rather than a medical issue. As it is clearly a disease of poverty, the answer is the general improvement in living standards that is bound to occur worldwide as a result of neoliberal political philosophies and structural readjustments introduced by the World Bank. This view is fallacious for two reasons. Firstly, there are clear indications that the health sector reforms within the structural readjustment programmes are further depriving the poor of adequate medical care.<sup>3-4</sup> Secondly, the concept that health is the natural consequence of socioeconomic improvement is naive: it neglects the impact on health services of the numerous specific political

actions taken in response to intense lobbying by public health advocates.<sup>5</sup>

To redress the balance and as a focus for advocacy, the World Health Organisation is promoting its "Stop TB—use DOTS" campaign, based on its five point directly observed therapy short course (DOTS) strategy.<sup>6</sup> This calls for government commitment to national tuberculosis programmes, regular supplies of drugs, effective diagnostic microscopy services, treatment given under direct observation by trained supervisors, and audit of the efficacy of the strategy.

Despite the name, direct observation of therapy is just one element of the DOTS strategy, though it is the most debated and contested one.<sup>7</sup> Observed therapy is of no avail without the necessary drugs free at the point of delivery and government commitment to the establishment and maintenance of effective tuberculosis control programmes. Such initiatives do not come cheaply, even though the treatment of tuberculosis is among the most cost effective of all medical interventions in terms of years of healthy life saved.<sup>8</sup>

Fortunately, there are signs of renewed interest. High level discussions are taking place in the United States,<sup>9</sup> and, in the United Kingdom, the Department for International Development has been generous in supporting tuberculosis control as part of its commitment to relief of poverty.<sup>10</sup> In addition, a new British charity, TB Alert, has just been launched. As suggested by its name, this charity will aim to play a major role in advocacy for political commitment and in contributing to the funding of tuberculosis control. Without these, 200 million people alive today will eventually become ill with tuberculosis.<sup>9</sup>

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