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TB Alliance Submission for 2021-2022 Budget

Key Recommendations

- Redouble Global Health Security in the wake of global and regional Covid-19 pandemic:
 - Investments in Global Health wherein 3% of national development budgets are allocated to infectious disease research and medical product development such as drugs, diagnostics and vaccines;
 - Implement the commitment made at the UN General Assembly in 2018 to contribute "a fair share" to tuberculosis (TB) research and development (R&D) which can be achieved by allocating 0.1% of R&D funds to TB research and product development;
 - Double TB R&D Funding, providing \$30 million per year to support research on TB;
 - Maintain Indo-Pacific Centre for Health Security Initiative, which has proven to be an efficient and successful vehicle to support the flexible and longer-term investment required for TB R&D.

About TB Alliance

TB Alliance is a not-for-profit organization dedicated to the discovery, development and delivery of better, faster acting, and affordable tuberculosis (TB) drugs that are available to those who need them. We envision a world where no one dies of TB. Since our inception in 2000, TB Alliance has led the global search for and development of new TB treatment regimens. TB is treated with a combination (also called regimen) of drugs to ensure cure as well as avoid development of resistance; this aspect of TB treatment makes developing cures even more complex than the usual development of antibiotics. TB Alliance has needed to catalyse the field of TB drug development and convene partnerships to forge the progress that is urgently needed for better TB treatments.

As a product development partnership (PDP), TB Alliance has developed a unique position to leverage a global network of public and private partners. We build partnerships between the public, private, academic, and philanthropic sectors to drive the development of new products and do so for underserved markets while ensuring effective pharmaceutical development is coupled with worldwide access, affordability and adoptability (AAA Mandate) criteria. We combine the research and development (R&D)



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expertise of our staff with the skills and resources of our partners to harness the most promising science wherever it may exist around the world.

In 2019, TB Alliance became the first not-for-profit organization ever to develop and register an anti-TB drug (pretomanid) and new short effective treatment regimen for patients with the most severe forms of drug resistant TB. The Australian government has been steadfast investor in global health, especially for TB product development and in TB Alliance - these investments have now come to fruition with major impact and benefits for patients in Australia and in the Indo-Pacific, securing global health in the region.

Problem Statement

Tuberculosis (TB) is a global disease, found in every country in the world. Even before Covid-19, TB is the leading infectious cause of death worldwide. Last year, 10 million people fell ill from TB and 1.4 million died. There is growing resistance to available drugs, which means the disease is becoming more deadly and difficult to treat. There were more than half a million cases of drug resistant TB last year - majority of these cases are found the Indo-Pacific region. Antimicrobial resistance (AMR)—which occurs when microorganisms no longer respond to the drugs designed to treat them—is emerging as one of the critical health issues of our time. From a development perspective, drug-resistant infections have the potential to cause a level of economic damage similar to the 2008 financial crisis, causing low-income countries to lose more than 5% of their GDP and push up to 28 million people into poverty by 2050. TB is estimated to cause a third of all AMR deaths globally.

The COVID-19 pandemic has served as a wake-up call to the world. Regions unable to cope suffer from waves of death and disability and major impacts on local and regional economies. This is the power of pandemics. In addition to the direct impact of COVID-19 cases, its residual impacts threaten the hard-won progress made against tuberculosis. The predominantly need-driven response being applied to COVID-19 is expected to result in vaccines and other new products developed in record time. The progress achieved against tuberculosis, could be exponentially increased if similar political will, urgency, and resources are proactively applied.

Current funding gaps in global health research are even more under-estimated than previously predicted and that the search for lifesaving treatments, diagnostics and vaccines are more urgently needed to safeguard against future infectious disease outbreaks as well as urgently address ongoing pandemics such as tuberculosis.

To ensure that sufficient resources are devoted to TB research to bring improved diagnosis, vaccines and treatment into operation in a timely way, countries should devote at least 0.1% of total R&D spending to TB research. If Australia is to achieve this target, it would need to more than double its TB research spending from \$US 9.6 million (\$A 13.5 million) to \$US 21.2 million (\$A 30 million) per year. The sources for this additional funding include any unallocated funding from the Indo-Pacific Health Security Initiative and the Medical Research Future Fund.