250,000 patients to benefit from free access to short-course TB prevention treatment across seven countries

Support from global consortium will expand access to shorter TB prevention options, help advance efforts towards TB elimination.

Johannesburg, 24 March 2023 – The Unitaid-funded IMPAACT4TB Consortium, led by the Aurum Institute, announced today that it will provide 250,000 patient courses of short course rifapentine-based preventive treatment regimens to seven countries to help prevent tuberculosis (TB). The patient courses will include the three-month 3HP regimen, and the even shorter 1HP, that is only taken for 28 days. This contribution is part of the Consortium’s ongoing efforts to end TB and improve global health outcomes.

The seven countries set to benefit from this initiative are Brazil, Haiti, India, the Maldives, Nigeria, Tanzania and Zambia. This supply of rifapentine-based preventive treatment regimens is expected to contribute significantly to the global effort to reduce the incidence of TB, which continues to be a major public health challenge worldwide.

“Despite commitments to end tuberculosis as a global epidemic by 2030, the disease remains the world’s deadliest infectious disease, killing around 4,400 people every day,” said Prof Gavin Churchyard, CEO of Aurum Institute and the principal investigator of the IMPAACT4TB project. “TB prevention is a cornerstone of any effort to eliminate TB, and we hope that these 250,000 patient courses will contribute to countries’ efforts to finally make TB a disease of the past.”

About one quarter of the world’s population is infected with a form of TB that causes no symptoms and is not contagious. Without treatment, 5% to 10% of those infected will develop active TB, which causes severe illness and can be transmitted from person to person through the air. TB preventive treatment regimens lower the risk of progression to TB in people at risk, including children, pregnant women and people living with HIV.

In recent years, new and shorter rifapentine-based TB preventive treatment regimens have been recommended by the World Health Organization (WHO) and are becoming increasingly available. Currently, over four million patient courses are being manufactured annually. These shorter regimens are associated with higher treatment adherence, completion, and outcomes. In fact, people taking shorter regimens are up to three times more likely to complete their course than those on longer regimens—leading to better outcomes and more lives saved.

In many high-burden TB countries, these new short-course TB preventive treatment regimens are modelled to be cost-effective for both people living with HIV and household contacts of all ages, regardless of whether contact investigation is already in place.

“The seven countries receiving these regimens have expressed their readiness not only to identify underserved and at-risk populations and ensure they receive these newer regimens,
but also to invest in strengthening systems around contact tracing and learning lessons on how to improve TB preventive treatment uptake and coverage,” said Dr Philippe Duneton, Executive Director of Unitaid.

These patient courses consist of shorter rifapentine-based regimens, including two treatment options: 3HP, a three-month oral treatment taken once weekly, and 1HP, a 28-day oral treatment taken once daily. Access to rifapentine-based regimens has been established in 71 countries, with over three million patient courses purchased to date. However, despite this progress, key groups and areas are still behind target.

The IMPAACT4TB Consortium’s provision of the patient courses, which was made possible due to cost savings achieved over the past five years, is part of the Consortium’s broader strategy to reduce the cost of rifapentine. Among other things, by working with global partners and manufacturers, the Consortium helped significantly reduce the access price of a three-month patient course of weekly rifapentine and isoniazid, from US$72 to US$14.25.

In addition to providing the patient courses, the IMPAACT4TB Consortium will also provide technical assistance to countries in their implementation efforts, including identifying populations that could benefit from TB prevention, and determining the most appropriate regimen for them. The project actively advocates for universal access to TB prevention tools through their #RightToPreventTB campaign to raise awareness within communities about effective prevention regimens.

In 2021 alone, close to 1.6 million people died from TB, while around 10.6 million people fell ill from the disease. Currently, the world is not on track to achieve the TB prevention targets set at the United Nations High-Level Meeting on TB held in 2018. While significant progress has been made in providing TB prevention to people living with HIV, the number of household contacts receiving TB preventive treatment remains unacceptably low. In fact, the current progress towards the target of providing tuberculosis preventive treatment (TPT) to 30 million people by 2022 is only at 42%, indicating a critical need for stronger efforts to scale up TPT for household contacts.

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Notes to Editors

**About IMPAACT4TB**

The Increasing Market and Public Health Outcomes Through Scaling Up Affordable Access Models of Short Course Preventive Therapy For TB (IMPAACT4TB) consortium is funded by Unitaid and led by the Aurum Institute and comprised of the Clinton Health Access Initiative (CHAI), Johns Hopkins University, KNCV the Dutch TB Foundation and the Treatment Action Group (TAG).

People living with HIV (PLHIV) and child contacts are at highest risk of contracting TB. The initial IMPAACT4TB grant looked at the safety of co-administering and dosing of 3HP and DTG and, once that was ascertained, the project moved on to introduce and rollout 3HP as an additional TPT option among PLHIV and household contacts of TB patients in 12 low-middle income countries, namely: Brazil, Ethiopia, Cambodia, Indonesia, South Africa, India, Zimbabwe, Kenya, Malawi, Mozambique, Ghana and Tanzania.

Although the project was focused in these 12 countries, efforts were also made to ensure wider access to 3HP and catalysed orders for these regimens in 58 additional countries to date. The grant
also funded studies on the use of 3HP in ART-naive patients on DTG based regimens (DOLPHIN TOO), dosing of 3HP in children from 0-2 years (TBTC Study 35), improved TPT service delivery as well as community advocacy for improved TPT policy and uptake within project countries. The Consortium will continue to collaborate globally to advance TB research and improve access to life-saving preventive treatments.

**About Unitaid**

Unitaid is a global health agency engaged in finding innovative solutions to prevent, diagnose, and treat diseases more quickly, cheaply, and effectively, in low- and middle-income countries. Its work includes funding initiatives to address major diseases such as HIV, malaria, and tuberculosis, as well as HIV co-infections and co-morbidities including advanced HIV disease, cervical cancer, and hepatitis C, and cross-cutting areas, such as fever management. Unitaid is now applying its expertise to address challenges in advancing new therapies and diagnostics for the COVID-19 pandemic. Unitaid is hosted by the World Health Organization. For more information, visit [www.unitaid.org](http://www.unitaid.org).

**About Aurum Institute**

The Aurum Institute is a proudly African organisation working to advance health science and innovation to create a healthier world for future generations. We partner with governments, the private sector and civil society to design and deliver high-quality care and treatment to people in developing communities. [https://www.auruminstitute.org/](http://https://www.auruminstitute.org/)