



January 2026

GREETINGS FROM THE CHAIR!

Happy New Year!! No, really, I mean it! We face yet another horror (i.e., unprovoked war) from our current Administration that will increase challenges to **#PublicHealth** and our efforts to **#EndTB**. But there are moments of happiness, joy, and connection swirling all around us – **#CommunityCures!** Therefore, compliment a stranger, hug a loved one, attend a service or a march, do a little dance with the kids, and stay connected. For our New Year's resolution, we are hoping to connect better with you and all who want to help **#EndTB**. We challenge all of you to recruit at least one new member for Stop TB USA! Share with them why you care and have them [sign up here](#); I bet you will feel better if you do.

- Cynthia A. Tschampl, PhD, Stop TB USA Immediate Past Chair

DC UPDATE

Government is open until January 30, 2026: Congress worked out a deal to re-open the government through January 30, 2026, using a continuing resolution (CR). Regular work is underway for the remaining appropriations bills for fiscal year '26 (FY26), including the "LaborHHS" bill that covers funding for the CDC. Congressional Leaders need to hear from their colleagues a strong message about strengthening our public health infrastructure. Therefore, our top action is to continue to ask your Representative in the House and two Senators to ask Leadership to pass \$225 million for CDC's TB programs for FY26. The Capitol Switchboard is **1-202-224-3121**.

Sample script: As your constituent and a public health advocate, I urge you to speak out in favor of strong funding for the CDC's TB programmatic and research funding. Since TB anywhere is TB everywhere, we cannot afford the risk of further increased rates of transmission or drug resistance. Increases in TB drug prices, let alone the three years of increased cases, all require more resources. *[Add a sentence about why you care.]* Will your boss talk to the Chair and Ranking Member of the Appropriations Committee in support of \$225 million for CDC's TB programs? I look forward to hearing a response. *[Leave phone number and email to receive a response.]*

Bonus points if you write us at leadership@stoptbusa.org and tell us how your calls went!!

ANNOUNCEMENTS

- [An early present for 2026: Innovative near-POC pPuslife TB Test available in GDF Catalog for \\$3.60](#)
- [CALL FOR NOMINATIONS: Stop TB Partnership Kochon Prize 2025 Champions of Domestic TB Financing](#)

Other Opportunities:

- [National Institute of Allergy and Infectious Disease \(NIAID\) needs volunteers for clinical studies](#)
- [Hep B United Mini Grant Application 2026 | Deadline: January 15, 2026](#)
- [Showcase Your Public Health Work at APA 2026 | Deadline: January 14, 2026](#)

TB RESOURCES & REPORTS

- [The WHO global tuberculosis report 2025: 1.3 drug-resistant TB](#)
- [Global TB Report: “Progress is Possible: We Know What Works, Let's Scale It” - Updates](#)
- [Tuberculosis Fast Facts](#)
- [Tuberculosis Therapeutics Market Opportunity, and Forecasts Report 2025-2030](#)
- [Tuberculosis deaths in the United States, 1953 to 2022 - Our World in Data](#)
- [CDC's 2024 Global Health Impact: By the Numbers](#)
- [Provisional 2024 Tuberculosis Data, United States](#)

TB IN THE NEWS

TB Incidence Reports:

- [New tuberculosis case detected in Northern California. Here's what to know](#)
- [Tuberculosis case reported at Farmville Middle School | WNCT](#)
- [Tuberculosis case at Forrest City Schools noncontagious, district officials say](#)
- [Health Department: One suspected case of Tuberculosis inside Broome County Correctional Facility](#)
- [UC Davis Conducts Contact Tracing After Case of Active Tuberculosis Identified](#)

TB Articles:

- [AI tool shows promise for faster, more accurate pediatric tuberculosis detection](#)
- [Why we should move away – not towards – symptom-based terminology and policy in tuberculosis](#)
- [DOH calls for more investments, collaborations to end TB by 2030 - GMA Network](#)
- [America's pledge to the Global Fund is smaller than it appears - POLITICO Pro](#)
- [You, Too, BCG? Tuberculosis Jab Said to Ward Off Alzheimer's](#)
- [Why Is a 100-Year-Old Vaccine Still Our Only Defense Against the World's Deadliest Disease](#)

- [John and Hank Green's vlog is a multimillion-dollar philanthropy machine – Financial Times](#)
- [La Bohème Redux: TB Takes Center Stage](#)

JOURNAL ARTICLES

- [Adaptive bandit algorithms increase efficiency of mobile tuberculosis screening programs](#)
- [Hidden in Plain Sight: Peritoneal Tuberculosis Mimicking Ovarian Neoplasm—A Case Report](#)
- [Dysregulation of the JNK signaling pathway in tuberculosis: mechanisms and therapeutic strategies](#)
- [Health Department invests \\$1 million to protect Pennsylvanians from tuberculosis.](#)
- [This new, one-two punch could knock out drug-resistant TB - The Rockefeller University](#)
- [Anti-nausea drug could be used against drug-resistant TB - Nature](#)
- [Trial of High-Dose Oral Rifampin in Adults with Tuberculous Meningitis](#)

EVENTS, CONFERENCES, & COURSES

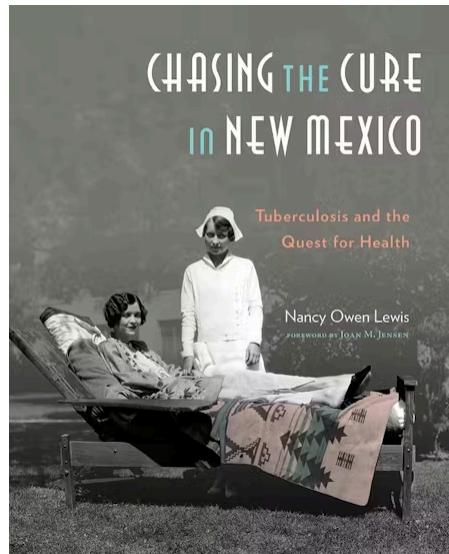
- [2026 END TB Conference of The Union - North America Region | February 25, 2026-March 1, 2026](#)

Register for **Stop TB USA's Annual Membership Meeting** on February 26, 2026 at 6:00 pm EDT. Members attending the NAR conference in person are welcome to join the meeting onsite. However, registration is open to **all** Stop TB USA members, regardless of NAR attendance.

- [Monthly |SEATRAC Seminar Series](#)
- [National Network of Public Health Institutes Annual Conference | April 28-30, 2026](#)
- [International Conference of the American Thoracic Society | May 15-20, 2026](#)

TB BOOKSHELF

Chasing the Cure in New Mexico: Tuberculosis and the Quest for Health
By Nancy Owen Lewis



Chasing the Cure in New Mexico: Tuberculosis and the Quest for Health

By Nancy Owen Lewis

Museum of New Mexico Press, 2016

ISBN: 0890136122

For contemporary audiences, Jared Diamond's casting of disease as a historical actor in *Guns, Germs and Steel* simply continued a tradition going at least back to Thucydides. It's well documented how the bubonic plague reshaped early modern Europe's economic landscape more than any war or dynastic change. In the US, smallpox was not only weaponized against Native Americans but recent scholarship is exploring its role in the American Revolutionary War.¹ As for tuberculosis, civic leaders in parts of New York, Colorado, and California saw local sanatoriums as an engine of local growth, but as Nancy Owen Lewis discusses in *Chasing the Cure in New Mexico*, those promotional efforts paled to those in New Mexico, where emigration to the territory (and eventually 47th state in 1912) led to a full 10% of the population in 1920 being TB patients.

New Mexico's main attraction in the pre-antibiotic era was its high altitude and low humidity. Even when other factors gained prominence—such as sanitation and diet—New Mexico's sanatoria focused on their version of the modern real estate mantra, “location, location, location,” the attraction was “climate, climate, climate.”

But where did the initial patients go? While 19th century New Mexico lacked urban development, it had plenty of empty forts. Initially established to fight the Mexican-American war (1846-1848) they remained staffed to protect settlers from Native Americans (including the Apaches). Once the tribes were subjugated and the forts no longer used, the federal government was initially hesitant on converting them until the Spanish American War (1898) resulted in the army having a significant TB problem as many soldiers contracted the disease in the Philippines. During and following WWI New Mexico became the destination for armed forces members with TB.

Travel to New Mexico from more populous regions of the country was not a trivial matter—yes, railroads had replaced the covered wagon, but the cars were still cramped, poorly ventilated, and already weakened immune systems were vulnerable to whatever their

companions might have been exhaling. Moves to eliminate communal drinking glasses, clean the bathrooms, and wash the towels more frequently helped, but arrivals (who survived the trip) were often in far worse shape than when they left.

But what of their financial condition? Those with health insurance were rare (Lewis quotes a figure of 5%). Treatment wasn't free (nor was the train ticket), and often consumptives came with spouses and children who would need a place to live and a source of revenue. There was an expected pushback against infected and sometimes infectious indigents. New Mexico did not follow Texas' example—the Lone Star state's Health Office formally declared in 1909 that “Consumptives Unwelcome in Texas”—but fear of infection spreading often superseded the desire for business: Ojo Caliente Hot Springs which in 1903 marketed itself to consumptives seeking a cure, refused to admit them by the end of the decade. Sante Fe's Los Cerros Resort sought a middle-ground, advertising that “Sick people are not welcome, but it's a wonderful place for tired people.”² Of course the sanatoria knew the marketing value of high recovery rates, and the best way to achieve them was to attract patients in the early stages of the disease.

While the White establishment had an economic motive to track data, New Mexican Hispano and other Native communities had no hospitals and few doctors, making it difficult to determine rates of infection and disease. Such information might have led to earlier action before the mid-1930's when TB-rates among those communities were so high Congress appropriated funds to build a 104-bed facility in Albuquerque, serving patients from 30 different tribes. The New Mexico Bureau of Public Health's statement that, “The Native population is likely to come in constant contact with imported cases and consequently run grave risk [of infection]” and call for extensive tuberculin testing is especially noteworthy given the historical and everpresent institutional racism affecting health care as well as the stigma tuberculosis carries, i.e., *White outsiders are coming here and making our people sick.*

The advent of antibiotic treatment marked the end of the traditional sanatoriums, and Lewis's epilogue gives readers a final tour of the buildings and land as well as a discussion of the impact of tubercular artists and architects who came and stayed. Not all institutions became landmarks, however: the New Mexico State Sanatorium became a waste dump requiring superfund cleaning and is now a paintball park, reflecting the sanitoriums' emphasis on exercise and frequent repurposing of military installations.

1. See Fenn, Elizabeth *Pox Americana The Great Smallpox Epidemic of 1775-82*.

2. For more examples of the pushback against tuberculars in formerly welcoming locations see Rothman, Sheila M. *Living in the Shadow of Death : Tuberculosis and the Social Experience of Illness in American History* (featured in the [TB Wire: May 2024](#)).

- David Moskowitz, Chair, Media Work Group

Stop TB USA: Where we unite to #EndTB!

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Stop TB USA

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