



THE U.S. PARTNER IN THE GLOBAL STOP TB PARTNERSHIP

April 2025

GREETINGS!

Many of my meetings these days start with a breathing exercise (e.g., taking three deep breaths or box breathing), which is great because my brain always needs more oxygen, and it helps me focus on what is in my power, such as taking daily action to help **#EndTB**. I am beyond excited to be joining around 200 other people in Washington DC for the April 9th TB Hill Day. All of us are committed to getting people the care they need and preventing the spread of this deadly disease.

Will you support us? Will you call or email your members of Congress? (See our DC Update below.) Will you recruit new Stop TB USA members? (Just send them this link.) Will you share stories with family and neighbors about the human cost of the administration's cuts to lifesaving services, jobs, and critical research—all made to further enrich the ultra-wealthy? Will you tell your colleagues you really appreciate their hard work?

You see, every day there is some small action you can do to keep us moving in a more positive direction.

- Cynthia A. Tschampl, PhD, Immediate Past Chair

DC UPDATE

April 9th is TB Hill Day! Over 200 people who care about ending TB will be in Washington D.C. including some of our board members, coalition partners, and TB survivors. You can support them by calling all three of your members of Congress on April 9th.

Call the Capitol Switchboard at **1-202-224-3121**; leave a message on the voicemail if no one answers.

Here is our top ask:

Ask your Representative/Senator to speak up for \$225 million for CDC's TB programs in fiscal year 2026 (FY26).

Sample script: As your constituent and someone who cares about everyone's health, I urge you to speak with leadership in support for \$225 million for CDC's TB programs in fiscal year 2026. Decades of budget cuts and the fallout from the COVID-19 pandemic has led to TB outbreaks in all 50 states. Local TB programs are also overwhelmed because of drug shortages and drug price increases. [Add a sentence about why you care.] Will your boss support \$225 million for CDC's TB programs? I look forward to hearing a response. [Leave phone number or email if you wish to receive a response.]

Pro tip: In addition to the Capitol Switchboard at **1-202-224-3121**, you can download the 5 calls app (https://apps.apple.com/us/app/5-calls-contact-your-congress/id1202558609). It will find the direct numbers for your Representative and Senators and connect you automatically.

If you would like additional details or "asks" for your members of Congress, please email us at<u>leadership@stoptbusa.org</u>. Bonus points if you write us at leadership@stoptbusa.org and tell us how your calls went!!

ANNOUNCEMENTS

- <u>2025 U.S. TB Elimination Champions</u>
- <u>New Jersey Health Department Recognizes March 24 as World TB Day</u>
- WHO calls for countries to address disruptions to TB services CIDRAP
- <u>Tuberculosis Guidelines Updated: Expert Panel Advises Shorter Treatment Regimens</u>
- <u>Tuberculosis Resurgent as Trump Funding Cut Disrupts Treatment Globally</u>
- Book Review: John Green takes on TB in 'Everything is Tuberculosis'

Other Opportunities:

- <u>Notice of CDC Funding Opportunity Announcement</u>
- <u>National Institute of Allergy and Infectious Disease (NIAID)</u>

TB RESOURCES & REPORTS

In partnership with the Mayo Clinic Center for Tuberculosis, a CDC-designated Center of TB Excellence, our Academic Detailing Work Group has initiated the **TB Champions Network**. "TB Champions" will complete training focused on recognizing and diagnosing active TB disease and treating latent TB infection in both adults and children. For more information, visit their website and learn how to become a TB Champion today!



- Global Tuberculosis Report 2024
- CDC's 2024 Global Health Impact: By the Numbers
- <u>Digital TB Surveillance System Assessment Report</u>
- <u>Tuberculosis Diagnostics Market Opportunities and Strategies Report 2024-2033</u>
- <u>KEEP THE LIGHTS ON A Stop TB Partnership Campaign to Sustain TB Survivor Networks</u> <u>and Local Community Organizations</u>
- Integrated approach to tuberculosis and lung health

TB IN THE NEWS

TB Incidence Reports:

- <u>Expert: Big TB Outbreaks in U.S. Are Rare, but Global Control Is Needed | Healthiest</u>
 <u>Communities</u>
- After Decades of Decline, Tuberculosis Is on the Rise in the U.S. Here's What You Need to Know.
- <u>Tuberculosis on the Rise Again in the United States</u>
- <u>Can Vaccinations Resolve Tuberculosis Disruptions</u>

TB Articles:

- What Does It Take to End TB? A Lifetime of Advocacy, with Deliana Garcia
- <u>Millions of People in the U.S. Have Inactive TB but Don't Know It | Across New Jersey, NJ Patch</u>
- World TB Day: Children with TB are especially vulnerable to recent US aid cuts
- The 'Black Angels' cared for tuberculosis patients when no one else would
- For John Green, Tuberculosis Is More Than A Disease
- Surveillance of drug-resistant TB World Health Organization (WHO)
- <u>World Tuberculosis Day 2025: the end of TB is possible</u>
- <u>The fight against TB was frozen in time, until now. See its future.</u>
- <u>Trying to avert a TB outbreak, Vanderburgh County plans new clinic</u>

JOURNAL ARTICLES

- <u>Study discovers tuberculosis genes necessary for airborne transmission</u>
- <u>TB Vaccination Could Enhance BCG Response in Patients With Non–Muscle-Invasive Bladder</u> <u>Cancer, Study Finds</u>
- Equitable, personalised medicine for tuberculosis: treating patients, not diseases
- <u>CD4 T cell dysfunction is associated with bacterial recrudescence during chronic tuberculosis</u>

- Four advances that could change tuberculosis treatment
- <u>Model-Based Analysis of Impact, Costs, and Cost-effectiveness of Tuberculosis Outbreak</u>
 <u>Investigations, United States</u>

EVENTS, CONFERENCES, & COURSES

Thank you to everyone who attended our **TB Hill Day Media Training on Wednesday, March 26th**! As a recap, we learned about concise communication using the EPIC format, inspired by <u>RESULTS</u>.org. We also explored how to write Letters to the Editor (LTEs), short opinion pieces published in newspapers and valued by Congressional offices to understand their constituents'

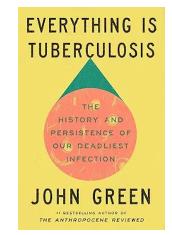
priorities. Stay tuned for our next session<u>and invite your friends</u>!



- <u>Highlights from NAR What is Hot in Treatment Differentiation and Individualization | April</u> 8th, 11:30 am – 1:00 pm Pacific Time
- <u>Monthly |SEATRAC Seminar Series</u>
- <u>Inaugural Annual WGNV Meeting</u>
- American Thoracic Society (ATS) International Conference | May 16-21

TB BOOKSHELF

*Everything Is Tuberculosis: The History and Persistence of Our Deadliest Infection*by John Green



*Everything Is Tuberculosis: The History and Persistence of Our Deadliest Infection*by John Green Crash Course Books, 2025

ISBN: 9780525556572

There are three primary characters in novelist John Green's new non-fiction work, *Everything is Tuberculosis: The History and Persistence of Our Deadliest Infection*: Henry, a teen from Sierra Leone who is fighting drug-resistant tuberculosis (TB), the bacillus–along with its history and biology, and Green himself. While the disease takes up the bulk of the text, the other two are essential because much of the anticipated audience for *Everything* is not coming to the book because of the subject, but because they are followers of the author. Green himself serves as proxy for those whose familiarity with tuberculosis is likely limited to period movies (e.g. *Moulin Rouge*), 19th century novels read in high school, and maybe some stories in their family history. So while *Everything* delves into everything TB–from Koch's discoveries and failed cures to modern drug treatments and Direct Observed Therapy Short-course (DOTS)--Green's human anchors always make it clear how decisions in the lab or the boardrooms of Johnson & Johnson and Danaher have consequences far beyond shareholder portfolio. In the case of DOTS, for example, Green discusses his issues with maintaining a course of medication as a lead into what DOTS says about the patient-clinician relationship, and how labels related to "adherence" and "compliance" can extend stigma beyond that of the disease itself.

Green completed *Everything is Tuberculosis* before the U.S. elections of November 2024 and the subsequent unilateral gutting of USAID in January 2025. This could make the book, a call to awareness as much as one to action, seem understated and askew in urgency and tone: readers of the late Paul Farmer's writings on race, money, and healthcare can easily imagine his *initial* response to the current situation. But just as Farmer's character and faith kept him focused on positive outcomes in his daily work, Green expounds on "virtuous cycles" citing the work of Farmer's Partners In Health (PIH.org) and the TB-focused among his Nerdfighter fans (TBFighters.org). In this exploration of advocacy, he reflects on the "megaphone" that has come with his job of writing and by extension its fickleness as to who the message reaches as well as the risks associated with it: "the megaphone can hurt people's ears[...]it can seem like shouting" and thus be ineffectual or even counterproductive.

In the end, there's a most likely unintentional yet important message on TB advocacy in the "Further Readings" section: the list effectively mirrors many advocates' personal TB bookshelves, showcasing just how few contemporary books there are on a disease that threatens hundreds of millions. This is a testament to the world's need to acknowledge that TB is far from a historical artifact or just another affliction in low- and lower-middle-income countries (LMIC).

It is everything.

- David Moskowitz, Chair of Media Work Group

Stop TB USA: Where we unite to #EndTB!

Invite a friend to sign up to receive the TB Wire and be a part of Stop TB USA! Donate today! https://donatenow.networkforgood.org/stop-tb-usa leadership@stoptbusa.org PO Box 260288, Atlanta, GA 31126

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