



### February 2025

#### **GREETINGS FROM THE CHAIR!**

I don't think I am alone in feeling like this has been a hellscape of a fortnight. The unmitigated censorship of people and data and illegal impoundment of all federal funds have disrupted every aspect of how we keep the United States safe. These actions by the  $47^{th}$  Administration will cause damage to our economical, physical, and mental health as well as to our national security even if they are reversed by Congress or the courts; it is so much easier to destroy building blocks of our civilization than to build them. But we must remember, disorientation and overwhelm are the goals. We will not succumb. We will keep focus on the 1-2 issues that we are most passionate about...like seeing a **#TBFreeUSA**!

- Cynthia A. Tschampl, PhD, Chair

p.s. Don't forget to join us for our annual meeting, Feb. 28<sup>th</sup>, 10:30am Eastern; register here.

#### DC UPDATE

Here are the top priority actions:

1. Call both your Senators and ask them to oppose the nomination of RFK Jr. Here is a sample		
script [Make it personal, rely on your own expertise and experience.]:		
Hi, I am a constituent of Senator	I am a	(scientist, nurse,
patient, etc.) from	(town/city). I am calling to ask him/her to oppose the	
nomination of RFK Jr. for Secretary of HHS. Mr. Kennedy is unqualified for the position and		
holds views on many public health issues that are not supported by science or evidence and		
will endanger the lives and well-being of all Americans, including myself and my family. I will		
follow up with the Senator on this	S.	

- 2. Ask your friends and families, especially in these states Alaska, Iowa, Kentucky, Louisiana, Maine, North Carolina, Oklahoma, Texas, Utah and West Virginia to call into their Senators with the same message.
- 3. Call or email your Representative in the House and ask them to support a strong CDC budget, especially for their TB programs.

**Pro Tips:** Call the Capitol Switchboard at **1-202-224-3121** and ask for your senator/representative or give your state if you do not know their name. When you are connected to an office, ask for the

Health Legislative Assistant. If you leave a voicemail message, include your name, phone number, and email so they can respond to you. If you would like additional details, email us at\_leadership@stoptbusa.org. Bonus points if you write us at leadership@stoptbusa.org and tell us how your call went!!

#### ANNOUNCEMENTS

- Stop TB USA still collecting nominations for Chair Elect and Secretary
- WHO consultation establishes country-led platform for clinical trials of tuberculosis
- <u>Study Finds Three New Safe, Effective Ways To Treat Drug-Resistant Tuberculosis</u>
- World TB Day 2025 Theme Announcement
- NMA Statement on Tuberculosis Outbreak
- <u>Dear Colleague Letter | Global Health CDC</u>
- The Stop TB Partnership Dedicates the Call For The 2024 Kochon Prize To All The Innovators In TB
- <u>Updates on the Treatment of Drug-Susceptible and Drug-Resistant</u> Tuberculosis

#### **Other Opportunities:**

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

# Nominate a U.S. TB Elimination Champion

Do you know an individual or organization making a significant impact in the fight against tuberculosis (TB)? Celebrate their efforts this World TB Day by nominating them as a 2025 U.S. TB Elimination Champion! Visit the U.S. TB Elimination Champions webpage to learn more about the process and submit your nomination by February 14<sup>th</sup>.



## TB REPORTS & RESOURCES

- Global Tuberculosis Report 2024
- Connections Newsletter (Issue 24-6) | CDC NCHHSTP
- CDC's 2024 Global Health Impact: By the Numbers
- <u>USAID's Global Tuberculosis (TB) Strategy 2023–2030</u>
- Digital TB Surveillance System Assessment Report

Tuberculosis Diagnostics Market Opportunities and Strategies Report 2024-2033

#### **CDC Updates Introduction to Tuberculosis Slide Set**

• CDC updated its Introduction to Tuberculosis slide set, a helpful resource for those new to tuberculosis (TB). The slides offer a basic overview of TB in the United States, including directly observed therapy (and video directly observed therapy. Visit the CDC website to download the updated slides.



Read more reports and resources on our website page 'From TB Wire'!

#### TB IN THE NEWS

#### TB Incidence Reports:

- Tuberculosis Outbreak: Is Alarming Outbreak Cause For Worry In MA?
- Study warns of emergence, spread of resistance to new drug
- KCK is in the middle of an 'unprecedented' tuberculosis outbreak. Here's what to know
- Kansas officials claimed TB outbreak was largest in U.S. history. CDC says that's wrong
- <u>Student recovering from tuberculosis returned without doctor's clearance, Charleroi</u> Area superintendent says
- · Screening underway at Tiyan High School after confirmed active tuberculosis case
- TB-Infected Pennsylvania Teen Returns To School, Putting Contacts On Notice
- Tuberculosis cases are spiking in Montreal

#### TB Articles:

- Extrapulmonary Tuberculosis Among US Veterans: What Are the Risk Factors?
- Shorter Treatment Regimens Recommended for Tuberculosis
- Tuberculosis: A persistent threat, yet clinical trials show promise
- Seeing the Light, Again. A new look at an old method of inhibiting TB transmission.
- Healing Body and Mind: Patient's Triumph Over MDR-TB and Depression
- New antibiotic shows promise in fighting tuberculosis
- The New Leading Infectious Disease: COVID-19 No Longer Top of the List

Read lots more TB news on our website page 'From TB Wire'!

### **JOURNAL ARTICLES**

- Self-destructing vaccine offers enhanced protection against **tuberculosis** in monkeys
- <u>Strong immune responses and robust protection following a novel protein in adjuvant</u> tuberculosis vaccine candidate
- Immune Reconstitution Inflammatory Syndrome in Tuberculosis and HIV
- <u>IntelliGenome Receives FDA Breakthrough Device Designation for CRISPR-TB Blood</u>
  Test
- <u>Characteristics of children and adolescents with multidrug-resistant and rifampicin-resistant tuberculosis and their association with treatment outcomes: a systematic review and individual participant data meta-analysis</u>
- Managing tuberculosis before the onset of symptoms
- A Meta-analysis of levofloxacin for contacts of Multidrug-resistant tuberculosis
- A new method for detecting mixed Mycobacterium tuberculosis infection and reconstructing constituent strains provides insights into transmission

Discover many more peer-reviewed articles on our website page 'Peer-Reviewed Publications'!

# **EVENTS, CONFERENCES, & COURSE**

- <u>Annual TB Conference The Union NAR | February 26-March 1, 2025</u>
- <u>Tuberculosis: Heterogeneity from Experimental Models to Human Disease | February 16-19, 2025</u>
- Monthly | SEATRAC Seminar Series
- Inaugural Annual WGNV Meeting

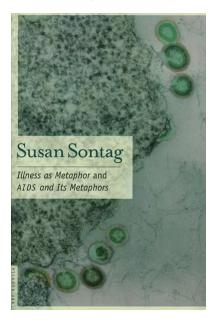
# **Updated Clinical Guidelines for Drug-Susceptible and Drug-Resistant Tuberculosis Treatment**

• The American Thoracic Society, U.S. Centers for Disease Control and Prevention, European Respiratory Society, and Infectious Diseases Society of America published updated clinical practice guidelines for treating drug-susceptible and drug-resistant tuberculosis (TB) disease in children and adults in the American Journal of Respiratory and Critical Care Medicine. The updated guidelines offer patients and healthcare providers shorter, safer, and more effective regimens with fewer pills and injections.



# TB BOOKSHELF

#### Illness as a Metaphor by Susan Sontag



Illness as a Metaphor by Susan Sontag

ISBN: 9780312420130

Last month's TB Bookshelf on Thomas Mann's *Magic Mountain* ended with a mention of Susan Sontag's *Illness as a Metaphor*. In her introduction to the follow-up second essay, *AIDS and its Metaphors*, Sontag writes how she intended the first as a call to arms against despair among those, who like her, were undergoing treatment for cancer. But reading these works also provides understanding how the masses and the most powerful can distance themselves from those who are suffering, effectively dismissing and condemning those infected with (or at risk for) any number of diseases—as most recently shown by the shuttering of USAID. Sontag's work encompasses how disease (specifically TB, cancer, and AIDS) need not be considered a familial or moral disorder, or punishment from the divine to be separated from known science: in this harmful messaging, illness stems not from a virus, a bacteria, or mutated cells—it becomes a metaphor to be wielded against the sufferer.

In her discussion, Sontag first explores the distance from a normal healthy, vibrant society. For example, the TB sufferer was both in a literal sense—TB sufferers and the mentally ill were sent to sanitariums—and a figurative one—the TB patient is passive, resigned to death. We

should consider how this is a stark contrast to the core American myth of rugged individualism. One can hear the question of those espousing cutting off funds: "*Why waste money on...*" thoseundergoing what Sontag calls "[...]a prototypical passive death [...] a kind of suicide" (Sontag, 24).

From there Sontag describes other ways those suffering from disease become *others*. She explores the belief that disease "expresses character" (Sontag, 43) making it a flaw in the individual that may spread into the body politic. The danger is clear as "the most terrifying illnesses are those perceived as not just lethal but dehumanizing" (Sontag, 126). Noteworthy among her examples is how Hitler said Jews produced a "racial tuberculosis among nations" (Sontag 82-83)--in addition to also being syphilis, cancer, and cholera. Treatment for such diseases demanded the radical treatment of not curing the afflicted, but removing the people from society.

The current drives for mass deportation, isolation, and deprivation of life-saving drugs, is slightly less graphic than the gas chambers, but the effect is the same and justification comes not through scientific fact, but the most fashionable metaphor, a *war* (to complement those on poverty, homelessness, drugs...). She shows how easy it is to conjure one: consider this segment from her description of the HIV virus—"the invader takes up <u>permanent residence</u>,"[emphasis mine] (Sontag 106). This logic is fodder for nativists using TB to justify their actions, e.g., (https://www.nytimes.com/2025/01/09/us/politics/trump-title-42-migrants.html?unlocked\_article\_code=1.oE4.paSv.\_sXVpID9oqBg&smid=url-share) But we're not in a shooting war, just a fight against greed, disinformation, and cruelty; as Sontag argues:

"We are not being invaded. The ill are neither unavoidable casualties nor the enemy. [And] about that metaphor, the military one, I would say if I may paraphrase Lucretius: Give it back to the war-makers." (Sontag, 183)

For us, our task may begin (but will not end) with the action items in the DC Update and the note from the chair.

- David Moskowitz, Stop TB USA Media Work Group Chair

**Stop TB USA**: Where we unite to #**EndTB**!

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**Stop TB USA** 

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