TB, AIDS: major progress

AIDS and tuberculosis still rank among the leading causes of death worldwide. But large-scale access to treatments has enabled a marked reduction in TB- and AIDS-related deaths in the last 15 years.

**AIDS, millions of lives extended.** At the end of 2014, about 37 million people worldwide were living with HIV, including 2 million new patients diagnosed during the year. In 2014, 1.2 million people died from an AIDS-related disease (1).

High as these figures are, they reflect a marked improvement in recent years: the annual number of new cases of HIV infection has fallen by 35% since 2000, and the number of deaths has fallen by 42% since 2004 (1). These reductions are the result of access to effective and affordable treatments for an increasing number of patients. For example, in June 2015, 15.8 million people, or 40% of infected patients, were receiving antiretroviral therapy, which represents an 84% increase in access since 2010. Access to treatment for large numbers of HIV-infected pregnant women led to a 58% decline in the number of infections among children between 2000 and 2014 (1).

Since 2000, it is estimated that about 8 million deaths have been averted through access to treatment (1).

**Millions of TB-related deaths have also been averted.** In 2014, the number of new cases of TB worldwide was estimated at nearly 10 million. And in the same year, 1.5 million people died of TB, including 400 000 co-infected with HIV (2).

Again, these figures are extremely high for a curable disease, but they also represent a very significant improvement. For example, the incidence of TB has fallen by 18% since 2000 (2). And the annual number of deaths has fallen by 47% since 1990, mainly since 2000 (3). It is estimated that access to affordable, effective therapy and diagnostics prevented 43 million deaths between 2000 and 2014 (3).

However, in 2014, about one-third of people with TB had not been diagnosed. According to the World Health Organization (WHO), the main cause of the gaps in the detection and treatment of TB is insufficient funding: a shortfall of 1.5 billion US dollars of the estimated 8 billion required for TB control (2,3).

**The fight must go on.** It took years to get to where we are now. Years of fighting speculation on drug prices. Years of fighting against discrimination and fatalistic attitudes. Years of negotiation to fund treatment access programmes. Years to organise health care for those affected. And in many countries, much remains to be done.