



The drug-resistant tuberculosis epidemic in the Asia–Pacific region

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Tuberculosis (TB) remains a significant global public health problem, disproportionately impacting low-middle income countries. The Asia–Pacific region carries over half the global TB burden. The successes in responding to the global TB epidemic are threatened by the emergence and spread of drug-resistant (DR) strains. The World Health Assembly declared DR-TB a global public health emergency in 2009; however, the international response has been slow and insufficient.

Cases are increasing, however only 1 in 5 patients receive appropriate treatment. Known high-burden DR-TB countries in the Asia–Pacific region include Bangladesh, China, India, Indonesia, Myanmar, Pakistan, Papua New Guinea, the Philippines and Viet Nam. Sub-national hotspots of epidemic spread are increasingly being recognised. The drivers of drug-resistance include health system factors (drug supply/quality), program factors (patient support, treatment regimens) and patient factors (drug metabolism and adherence).

Improved strategies and tools for prevention, diagnosis and treatment of TB are ultimately needed to end the epidemic. While these are developed, focus must continue on scale-up of programs to contain epidemic spread of DR-TB and reduce patient suffering. Greater resources are needed for both drug-sensitive and DR-TB care, prevention and control. The DR-TB crisis provides urgency and focus for coordinated action to improve regional health and development.