



International Union Against  
Tuberculosis and Lung Disease

Health solutions for the poor

## PRESS RELEASE

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## Childhood TB: Reversing Years of Neglect

**18 March 2012 / Paris** —An estimated one million children 14 years old and under will need treatment for tuberculosis this year — and some experts claim the number is actually much higher. TB in children is typically under-detected and under-reported, reflecting its low priority on the public health agenda. This **year's World TB Day** on 24 March will focus on children and the need to reverse this situation.

Dr Steve Graham who works for the **Child Lung Health Division of the International Union Against Tuberculosis and Lung Disease (The Union)**, says reversing the years of neglect will require improvement in all three areas of TB control, prevention and treatment, as well as the resources to turn policy into practice.

*"Historically, TB control efforts have not focused on children because the majority are smear-negative and therefore not a major source of infection", he says. "With limited resources, the focus was put where it seemed most critical — on adults with smear-positive TB".*

*"But with the Millennium Development Goals seeking to reduce child morbidity and mortality, you can't ignore TB in children".* He points out that infants and young children are more likely to develop TB that disseminates throughout the body and TB meningitis, both of which carry a high risk of death and disability. Children who are HIV-infected also face a 20-fold greater risk of developing TB than uninfected children, and a 5-fold greater risk of death.

To both control and prevent TB, The Union recommends that case-finding efforts focus on children under 5 years who are living in a household with a smear-positive TB patient. If the children are well, they should be given isoniazid preventive therapy (IPT), which greatly reduces the chance of their developing active TB. If they are not well, they should be given a clinical examination, and treatment, if required.

Diagnosing TB in children can be challenging with existing tools. For example, children under 10 have difficulty producing enough sputum for the standard microscopy test. *"Our ability to even assess the magnitude of the problem is severely hampered by the lack of diagnostics that take into account the special requirements of children",* says Dr Graham, who also chairs the Child TB Subgroup of the Stop TB Partnership's DOTS Expansion Working Group.

Nevertheless, he points out that children with drug-sensitive tuberculosis respond well to treatment and tolerate the medicines very well. The idea that children are difficult cases to treat is one of the misconceptions that need to be changed through training and awareness building.

*"The failure to control, prevent and treat TB in children is a failure of the health care system, not a failure of the child",* says Dr Graham.

He notes that progress has been made over the past few years. *"We have made definite gains in terms of recognition at many levels. For example, before 2006, TB recording and reporting forms did not include boxes for children's ages. Today they do. We now have internationally recommended guidelines and resources that are enabling national tuberculosis programmes to put specific guidelines for children into place".*

However, much more must be done. *"The challenge now",* says Dr Graham, *"is to turn policies into well-functioning programmes with well-trained staff, who are equipped with child-friendly diagnostics and child-friendly medicines to ensure that all children receive the TB care they need and deserve".*



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### About The Union's Child Lung Health Division:

The Union established its Child Lung Health Division in 1995 to emphasise the need to build awareness and knowledge about childhood TB, pneumonia and other child lung diseases. Since then it has offered technical assistance to many national tuberculosis programmes and produced resources, such as the Desk-guide to the diagnosis and management of childhood tuberculosis, and courses on managing child lung diseases. Through its TREAT TB initiative, The Union is currently researching the effectiveness of new diagnostic tools, such as line probe assay and Xpert MTB/RIF, that show promise for serving children better than current technologies.

### About The Union

The mission of the International Union Against Tuberculosis and Lung Disease (The Union) is to bring innovation, expertise, solutions and support to address health challenges in low- and middle-income populations. With nearly 10,000 members and subscribers from 150 countries, The Union has its headquarters in Paris and offices serving the Africa, Asia Pacific, Europe, Latin America, Middle East, North America and South-East Asia regions. Its scientific departments focus on tuberculosis and HIV, lung health and non-communicable diseases, tobacco control and research. Learn more at [www.theunion.org](http://www.theunion.org)