STATEMENT AT
THE SEVENTY-FIRST SESSION OF THE WHO REGIONAL COMMITTEE FOR THE
WESTERN PACIFIC,
6-9 October 2020
Agenda item 14. Progress reports on technical programmes

The International Union Against Tuberculosis and Lung disease (The Union) notes that tuberculosis is the world’s largest killer infectious disease. Asia Pacific is home to over 6.2 million people with TB - 62% of the global estimate. COVID-19 related lockdown measures are creating barriers in accessing comprehensive TB services. Early diagnosis, contact tracing, initiation of TB treatment, uninterrupted treatment, follow-up, side-effects management, and TB care is getting affected.

Tobacco use is a common risk factor for non-communicable diseases (NCDs), active TB disease and latent TB infection. Evidence that is showing people with conditions such as NCDs are more at risk of developing severe COVID-19 disease and severe outcomes. More worrying is tobacco smoking is associated with a poor evolution of COVID-19 and more serious results, including admission to intensive care units, use of mechanical ventilators, and death.

Tobacco kills over 8 million people every year globally, out of which 2.3 million deaths occur in Asia Pacific region. This region has about 600 million tobacco smokers and is the prime target of multi-national tobacco companies. More concerning is that this region also has the world’s highest tobacco use rates, and two-thirds of all men use tobacco. As per the WHO Global Tuberculosis Report 2019, smoking remains as one of the 2nd biggest risk factors attributable to TB that causes 0.86 million TB in 2018. An estimated 2.3 million TB cases were attributable to undernutrition, 0.83 million to alcohol abuse, 0.81 million to HIV infection and 0.36 million to diabetes.

We urge Member States to outline concrete steps they will take to ensure that the fight against TB will be prioritized and that they continue to strive to meet the END TB strategy targets. COVID-19 has made us realize the importance of Health For All, where no one is left behind. Health security is essential for everyone. TB anywhere is TB everywhere is an old slogan but COVID-19 public health emergency reminds us again that what ails one, ails us all. Health services, including national programmes to combat TB, need to be actively engaged in ensuring an effective and rapid response to COVID-19 while ensuring that TB services are maintained and uninterrupted. It is important that the progress made in TB prevention and care is not reversed by the COVID-19 pandemic.

We ask Member States to ensure uninterrupted supply of medicines and healthcare services to people living with NCDs, TB and HIV, including education and counselling on maintaining a healthy diet, avoiding alcohol, keeping physically active, safeguarding mental health, promoting cessation services to quit tobacco use.

We urge Member States to make effective implementation of WHO Framework Convention on Tobacco Control (FCTC), that also serves as a foundation for government to keep vigilance and safeguard themselves from undue influences by tobacco industry. Therefore, governments are strongly encouraged to apply such good practice by developing a code of conduct for other unhealthy commodity industries as they use similar tactics to aggressively interfere in policies.