The Bali Declaration on TB/Diabetes – How Do We Track Progress on Research and Policy?

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Global Burden of DM and TB

Diabetes Mellitus: 2015
[IDF Diabetes Atlas 2015]

- 415 M People Affected
- 7 M New Cases
- 5.0 M Deaths
- 79% Cases LIC & MIC

Tuberculosis: 2014
[WHO- Global TB Control 2015]

- 13.0 M Cases
- 9.6 M New Cases
- 1.5 M Deaths (1.1 M non HIV)
- 95% Cases LIC & MIC
Diabetes And Tuberculosis – the converging epidemics

- DM increases the risk of active TB about 3-fold
- DM increases the risk of adverse TB treatment outcomes
  - Delayed sputum conversion
  - Higher relapse rate
  - Higher death rate
- Drug-drug interactions may complicate treatment
## Dateline of Developments .. so far

<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
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<tr>
<td>Nov-09</td>
<td>Expert meeting convened by the WHO, the Union and the World Diabetes Foundation</td>
<td>Consultation Meeting on Tuberculosis and Diabetes Mellitus: Meeting summary and recommendations. Int J Tuberc Lung Dis 2010; 14 (12) :1513–1517</td>
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<td>Prioritized Agenda for Research defined</td>
<td>Defining the research agenda to reduce the joint burden of disease from Diabetes mellitus and Tuberculosis. Trop Med Int Health 2010; 15: 659–663</td>
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<td>2012-2013</td>
<td>WDF support along with WHO-Union collaboration for routine implementation of bi-directional screening in the two largest affected countries (India and China) – India went on to make a policy decision to screen all TB patients for DM</td>
<td>Screening of patients with tuberculosis for diabetes mellitus in India. Trop Med Int Health. 2013 May;18(5):636-45.</td>
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<td>Screening of patients with diabetes mellitus for tuberculosis in India. Trop Med Int Health. 2013 May; 18(5):646-54</td>
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### A) Establish mechanisms for collaboration
- Set up means of coordinating DM and TB activities
- Conduct surveillance of TB disease prevalence among persons with DM in medium and high TB burden settings
- Conduct surveillance of DM prevalence in TB patients in all countries
- Conduct monitoring and evaluation of collaborative DM and TB activities

### B) Detect and manage TB in DM patients
- Intensify detection of TB among persons with DM
- Ensure TB infection control in health care settings where DM is managed
- Ensure high-quality anti-tuberculosis treatment and management in DM patients

### C) Detect and manage DM in TB patients
- Screen TB patients for DM
- Ensure high-quality DM management among TB patients

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The report, “The Looming Co-epidemic of TB-Diabetes: A Call to Action” was launched at the 45th Union World Conference on Lung Health in Barcelona, Spain October 28-November 1. It synthesizes evidence from the medical and scientific literature, promotes an international policy framework for action and lays out a new research agenda to fill knowledge gaps.
Tuberculosis and diabetes represent two of the greatest global health challenges of our time, and their convergence globally represents a looming co-epidemic.

We HEREBY AGREE TO:

- Take action to support efforts to address the looming TB-diabetes co-epidemic as a public health priority, and accelerate the implementation of the Collaborative Framework for Care and Control of Tuberculosis and Diabetes, including by pursuing supportive policy actions and mobilizing resources,
- Advance policies on bidirectional screening in line with the Collaborative Framework,
- Support training and capacity development to enable prevention, early diagnosis, and treatment of both conditions at the primary health care level,
- Support efforts to increase public awareness about both conditions and their interaction, their individual and common risk factors, and actions for prevention,
- Improve access to continuous, uninterrupted treatment for both conditions at affordable costs,
- Support a robust research agenda that fuels both the discovery of new tools to address the TB-diabetes co-epidemic and operational research to improve collaboration and efficacy in existing programs,
- Eliminate the stigma surrounding TB that dissuades people from seeking prevention, treatment and care,
- Advocate on behalf of swift, decisive action against TB-diabetes in relevant state, national and international forums.
There was agreement that within the next 12 months there should be:

- A shared international repository for data, ideas, and research publications
- A WHO defined indicator to measure progress with respect to bidirectional strategies.

This NIH workshop is very timely and useful to help us build networks, document progress and identify areas for research and collaboration.