ANNEX 2 Country profiles For 30 high TB BURDEN COUNTRIES

20 high TB burden countries based on absolute number of incident cases

10 high TB burden countries based on severity of disease burden (incidence per capita)

Angola

ESTIMATES OF TB BURDEN, ^a 2017		
	NUMBER (THOUSANDS)	RATE (PER 100 000 POPULATION)
Mortality (excludes HIV+TB)	20 (12–31)	67 (39–103)
Mortality (HIV+TB only)	7.8 (3.9–13)	26 (13–44)
Incidence (includes HIV+TB)	107 (69–153)	359 (232–512)
Incidence (HIV+TB only)	18 (9.1–30)	61 (31–102)
Incidence (MDR/RR-TB) ^b	3.9 (1.6-7.2)	13 (5.5–24)

ESTIMATED TB INCIDENCE BY AGE AND SEX (THOUSANDS), ^a 2017				
	0–14 YEARS	> 14 YEARS	TOTAL	
Females	5.2 (4.7-5.6)	35 (27–43)	40 (31–50)	
Males	5.7 (5.2-6.3)	61 (43–79)	67 (46-87)	
Total	11 (9.5–12)	96 (60–131)	107 (69–153)	

TB CASE NOTIFICATIONS, 2017	
Total cases notified	57 877
Total new and relapse	54 401
— % tested with rapid diagnostics at time of diagnosis	
— % with known HIV status	59%
— % pulmonary	94%
— % bacteriologically confirmed among pulmonary	53%
UNIVERSAL HEALTH COVERAGE AND SOCIAL PROTECTION	
TB treatment coverage (notified/estimated incidence), 2017	51% (36–79)
TB patients facing catastrophic total costs	

TB case fatality ratio (estimated mortality/estimated incidence), 2017	0.27 (0.14-0.42)
--	------------------

TB/HIV CARE IN NEW AND RELAPSE TB PATIENTS, 2017		
	NUMBER	(%)
Patients with known HIV-status who are HIV-positive	3 613	11%
— on antiretroviral therapy	1 401	39%

DRUG-RESISTANT TB CARE, 2017			
	NEW CASES	PREVIOUSLY TREATED CASES	TOTAL NUMBER ^C
Estimated MDR/RR-TB cases among notified pulmonary TB cas	ses		2 000 (1 200–2 900)
Estimated % of TB cases with MDR/RR-TB	2.5% (1.1–4.3)	14% (10–18)	
% notified tested for rifampicin resistance	<1%	6%	534
MDR/RR-TB cases tested for resi	istance to secon	d-line drugs	0
Laboratory-confirmed cases		MDR/RR-TB:	534, XDR-TB: 0
Patients started on treatment ^d		MDR/RR-TB:	534, XDR-TB: 0

TREATMENT SUCCESS RATE AND COHORT SIZE

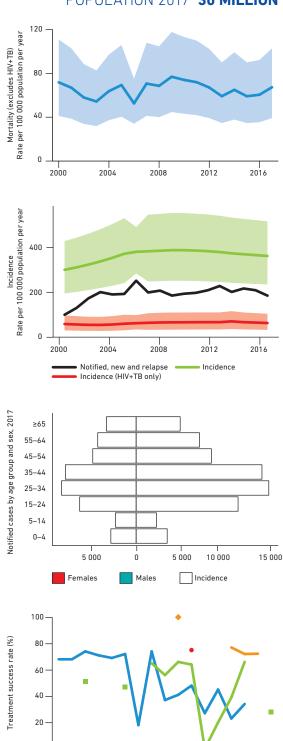
	SUCCESS	COHORT
New cases registered in 2016	27%	53 980
Previously treated cases registered in 2016	28%	7 069
HIV-positive TB cases registered in 2016	0%	2 773
MDR/RR-TB cases started on second-line treatment in 2015	72%	227
XDR-TB cases started on second-line treatment in 2015		0

TB PREVENTIVE TREATMENT, 2017

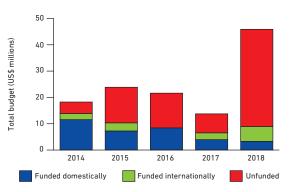
% of HIV-positive people (newly enrolled in care) on preventive treatment 13% % of children (aged < 5) household contacts of bacteriologically-confirmed TB cases on preventive treatment

TB FINANCING, 2018	
National TB budget (US\$ millions)	46
Funding source:	7% domestic, 12% international, 80% unfunded

POPULATION 2017 30 MILLION

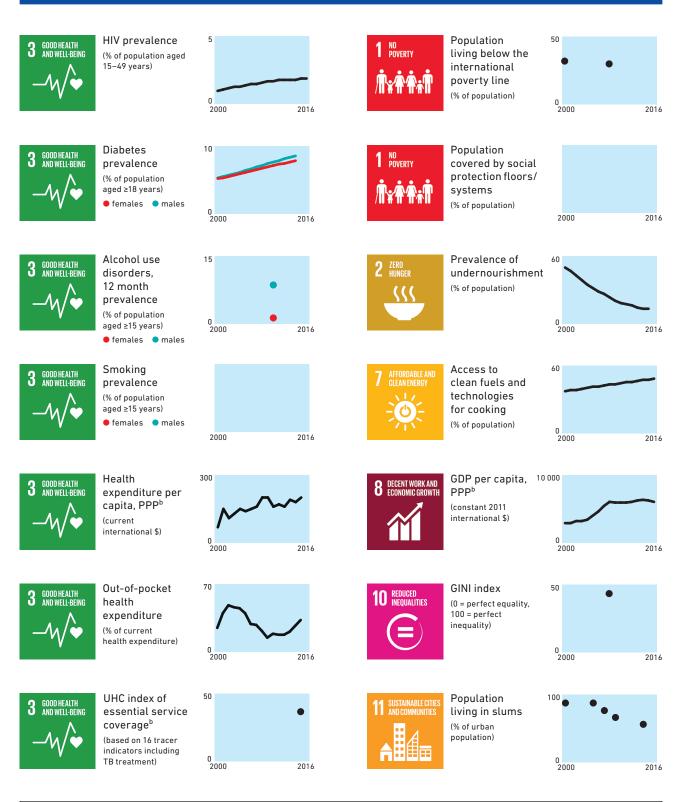






Data are as reported to WHO. Estimates of TB and MDR/RR-TB burden are produced by WHO in consultation with countries. Estimates are rounded and totals are computed prior to rounding.
^a Ranges represent uncertainty intervals.

⁶ MDR is TB resistant to rifampicin and isoniazid; RR is TB resistant to rifampicin.
⁶ Includes cases with unknown previous TB treatment history.
^d Includes patients diagnosed before 2017 and patients who were not laboratory-confirmed.



Targets for reductions in TB incidence and TB deaths set in WHO's End TB Strategy and the United Nations' Sustainable Development Goals (SDGs) are ambitious. Achieving them requires progress in reducing health-related risk factors for TB infection and disease, as well as broader social and economic determinants of TB infection and disease. WHO has developed a TB-SDG monitoring framework that comprises 14 indicators under seven SDGs for which there is evidence of an association with TB incidence. Further details are provided in **Chapter 2**.

^a Data sources: SDG indicators database, The World Bank, World Health Organization. Missing values and empty boxes indicate data not available in these data sources.

Bangladesh

ESTIMATES OF TB BURDEN, ^a 2017		
	NUMBER (THOUSANDS)	RATE (PER 100 000 POPULATION)
Mortality (excludes HIV+TB)	59 (38-85)	36 (23–52)
Mortality (HIV+TB only)	0.17 (0.085-0.29)	0.11 (0.05-0.18)
Incidence (includes HIV+TB)	364 (265–479)	221 (161–291)
Incidence (HIV+TB only)	0.55 (0.27-0.92)	0.33 (0.17-0.56)
Incidence (MDR/RR-TB) ^b	8.4 (3.8–15)	5.1 (2.3–9)

ESTIMATED TB INCIDENCE BY AGE AND SEX (THOUSANDS)*, 2017 0–14 YEARS > 14 YEARS TOTAL Females 17 (16–18) 118 (98–137) 134 (110–158) 18 (17-19) 230 (176-284) Males 212 (164-259) Total 35 (32-38) 329 (237-421) 364 (265-479)

TB CASE NOTIFICATIONS, 2017	
Total cases notified	244 201
Total new and relapse	242 639
— % tested with rapid diagnostics at time of diagnosis	<1%
— % with known HIV status	2%
— % pulmonary	81%
— % bacteriologically confirmed among pulmonary	74%
UNIVERSAL HEALTH COVERAGE AND SOCIAL PROTECTION	
TB treatment coverage (notified/estimated incidence), 2017	67% (51–92)
TB patients facing catastrophic total costs	
TB case fatality ratio (estimated mortality/estimated incidence), 2017	0.17 (0.1–0.26)

TB/HIV CARE IN NEW AND RELAPSE TB PATIENTS, 2017			
	NUMBER	(%)	
Patients with known HIV-status who are HIV-positive	89	2%	
— on antiretroviral therapy	84	94%	

DRUG-RESISTANT TB CARE, 2017			
	NEW CASES	PREVIOUSLY TREATED CASES	TOTAL NUMBER
Estimated MDR/RR-TB cases among notified pulmonary TB ca	ses		5 800 (3 800–7 800)
Estimated % of TB cases with MDR/RR-TB	1.6% (0.74–2.8)	29% (24–35)	
% notified tested for rifampicin resistance	18%	63%	49 943
MDR/RR-TB cases tested for res	istance to secon	d-line drugs	362
Laboratory-confirmed cases		MDR/RR-TB:	944, XDR-TB: 6
Patients started on treatment ^d		MDR/RR-TB:	920, XDR-TB: 6

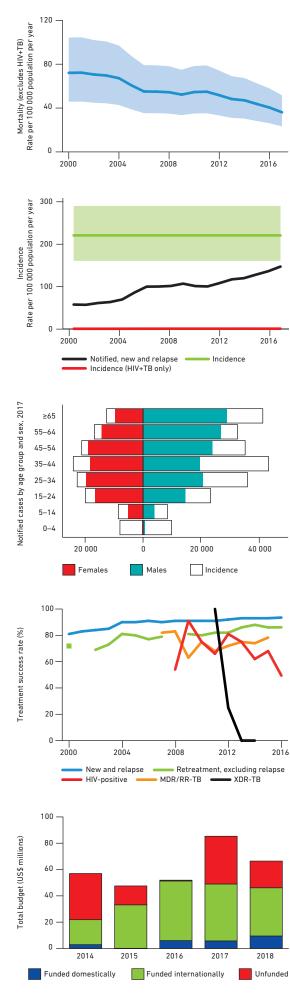
TREATMENT SUCCESS RATE AND COHORT SIZE		
	SUCCESS	COHORT
New and relapse cases registered in 2016	94%	222 252
Previously treated cases, excluding relapse, registered in 2016	86%	1 669
HIV-positive TB cases registered in 2016	49%	87
MDR/RR-TB cases started on second-line treatment in 2015	78%	880
XDR-TB cases started on second-line treatment in 2015		0

TB PREVENTIVE TREATMENT, 2017

% of HIV-positive people (newly enrolled in care) on preventive treatment % of children (aged < 5) household contacts of 21% (19-23) bacteriologically-confirmed TB cases on preventive treatment

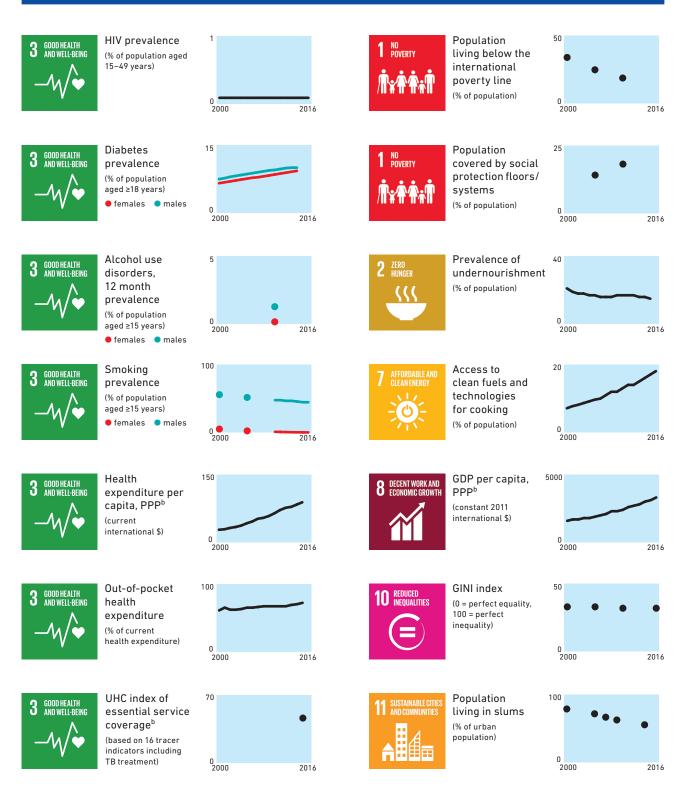
TB FINANCING, 2018	
National TB budget (US\$ millions)	66
Funding source:	14% domestic, 55% international, 31% unfunded

POPULATION 2017 165 MILLION



Data are as reported to WHO. Estimates of TB and MDR/RR-TB burden are produced by WHO in consultation with countries. Estimates are rounded and totals are computed prior to rounding.
^a Ranges represent uncertainty intervals.

⁶ MDR is TB resistant to rifampicin and isoniazid; RR is TB resistant to rifampicin.
⁶ Includes cases with unknown previous TB treatment history.
^d Includes patients diagnosed before 2017 and patients who were not laboratory-confirmed.



Targets for reductions in TB incidence and TB deaths set in WHO's End TB Strategy and the United Nations' Sustainable Development Goals (SDGs) are ambitious. Achieving them requires progress in reducing health-related risk factors for TB infection and disease, as well as broader social and economic determinants of TB infection and disease. WHO has developed a TB-SDG monitoring framework that comprises 14 indicators under seven SDGs for which there is evidence of an association with TB incidence. Further details are provided in **Chapter 2**.

^a Data sources: SDG indicators database, The World Bank, World Health Organization. Missing values and empty boxes indicate data not available in these data sources.

Brazil

ESTIMATES OF TB BURDEN, ^a 2017		
	NUMBER (THOUSANDS)	RATE (PER 100 000 POPULATION)
Mortality (excludes HIV+TB)	5.1 (4.8–5.3)	2.4 (2.3–2.5)
Mortality (HIV+TB only)	1.9 (1.4–2.5)	0.91 (0.67–1.2)
Incidence (includes HIV+TB)	91 (78–105)	44 (37–50)
Incidence (HIV+TB only)	11 (9.3–13)	5.3 (4.5-6.3)
Incidence (MDR/RR-TB) ^b	2.4 (1.8-3.1)	1.2 (0.86–1.5)

ESTIMATED TB INCIDENCE BY AGE AND SEX (THOUSANDS), ^a 2017			
	0–14 YEARS	> 14 YEARS	TOTAL
Females	5.2 (5-5.4)	24 (22–26)	29 (27–32)
Males	5.7 (5.5–5.9)	56 (50-63)	62 (54–70)
Total	11 (10–11)	80 (69–92)	91 (78–105)

TB CASE NOTIFICATIONS, 2017	
Total cases notified	86 858
Total new and relapse	79 222
— % tested with rapid diagnostics at time of diagnosis	26%
— % with known HIV status	78%
— % pulmonary	87%
— % bacteriologically confirmed among pulmonary	72%
UNIVERSAL HEALTH COVERAGE AND SOCIAL PROTECTION	
TB treatment coverage (notified/estimated incidence), 2017	87% (75–100)

TB patients facing catastrophic total costs	
TB case fatality ratio (estimated mortality/estimated incidence), 2017	0.08 (0.06-0.09)

TB/HIV CARE IN NEW AND RELAPSE TB PATIENTS, 2017		
	NUMBER	(%)
Patients with known HIV-status who are HIV-positive	7 831	13%
— on antiretroviral therapy	3 742	48%

DRUG-RESISTANT TB CARE, 2017			
	NEW CASES	PREVIOUSLY TREATED CASES	TOTAL NUMBER ^C
Estimated MDR/RR-TB cases among notified pulmonary TB cas	es		2 000 (1 600–2 400)
Estimated % of TB cases with MDR/RR-TB	1.5% (1.1–2)	8% (6–10)	
% notified tested for rifampicin resistance	30%	39%	27 716
MDR/RR-TB cases tested for resis	stance to secon	Id-line drugs	173
Laboratory-confirmed cases		MDR/RR-TB: 1 1	10, XDR-TB: 16
Patients started on treatment ^d		MDR/RR-TB: 9	64, XDR-TB: 16

TREATMENT SUCCESS RATE AND COHORT SIZE

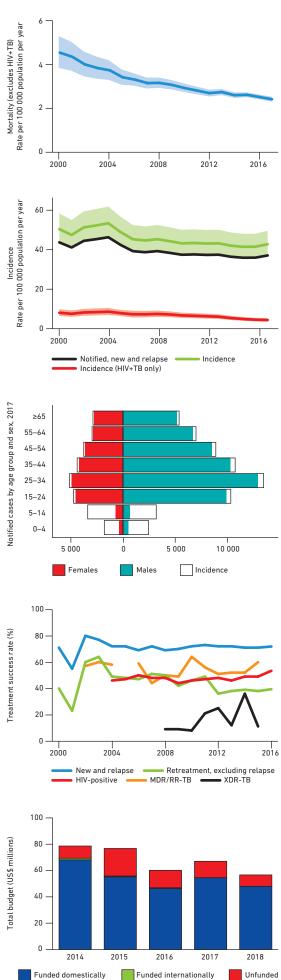
	SUCCESS	COHORT
New and relapse cases registered in 2016	72%	75 223
Previously treated cases, excluding relapse, registered in 2016	39%	7 251
HIV-positive TB cases registered in 2016	53%	7 366
MDR/RR-TB cases started on second-line treatment in 2015	60%	954
XDR-TB cases started on second-line treatment in 2015	11%	27

TB PREVENTIVE TREATMENT, 2017

% of HIV-positive people (newly enrolled in care) on preventive treatment % of children (aged < 5) household contacts of bacteriologically-confirmed TB cases on preventive treatment

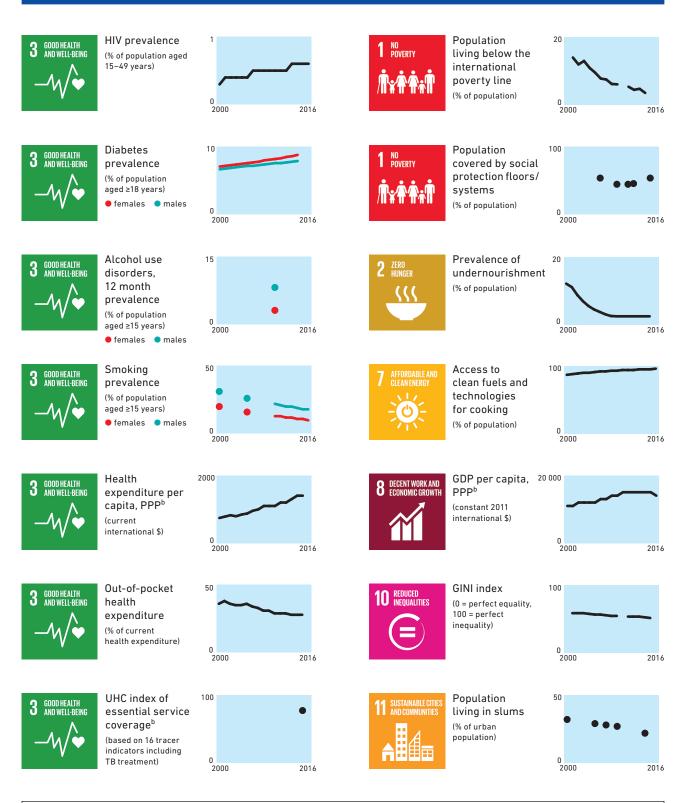
TB FINANCING, 2018	
National TB budget (US\$ millions)	57
Funding source:	85% domestic, 0% international, 15% unfunded

POPULATION 2017 209 MILLION



⁶ MDR is TB resistant to rifampicin and isoniazid; RR is TB resistant to rifampicin.
⁶ Includes cases with unknown previous TB treatment history.
^d Includes patients diagnosed before 2017 and patients who were not laboratory-confirmed.

GLOBAL TUBERCULOSIS REPORT 2018



Targets for reductions in TB incidence and TB deaths set in WHO's End TB Strategy and the United Nations' Sustainable Development Goals (SDGs) are ambitious. Achieving them requires progress in reducing health-related risk factors for TB infection and disease, as well as broader social and economic determinants of TB infection and disease. WHO has developed a TB-SDG monitoring framework that comprises 14 indicators under seven SDGs for which there is evidence of an association with TB incidence. Further details are provided in **Chapter 2**.

^a Data sources: SDG indicators database, The World Bank, World Health Organization. Missing values and empty boxes indicate data not available in these data sources.

China

	NUMBER (THOUSANDS)	RATE (PER 100 000 POPULATION)
Mortality (excludes HIV+TB)	37 (33–41)	2.6 (2.4-2.9)
Mortality (HIV+TB only)	1.8 (0.84–3.1)	0.13 (0.06-0.22)
Incidence (includes HIV+TB)	889 (761–1 030)	63 (54–73)
Incidence (HIV+TB only)	12 (6.3–18)	0.82 (0.45-1.3)
Incidence (MDR/RR-TB) ^b	73 (55–94)	5.2 (3.9-6.6)

ESTIMATED TB INCIDENCE BY AGE AND SEX (THOUSANDS),^a 2017 0–14 YEARS > 14 YEARS TOTAL Females 47 (46-49) 241 (223-260) 289 (264-313) 52 (50-54) Males 548 (484-613) 600 (526-674) 99 (94-104) 790 (678-901) 889 (761-1 030) Total

TB CASE NOTIFICATIONS, 2017	
Total cases notified	778 390
Total new and relapse	773 150
— % tested with rapid diagnostics at time of diagnosis	
— % with known HIV status	55%
— % pulmonary	95%
— % bacteriologically confirmed among pulmonary	32%
UNIVERSAL HEALTH COVERAGE AND SOCIAL PROTECTION	
TB treatment coverage (notified/estimated incidence), 2017	87% (75–100)
TB patients facing catastrophic total costs	
TB case fatality ratio (estimated mortality/estimated incidence), 2017	0.04 (0.04-0.05)
TR/HIV CARE IN NEW AND REI APSE TR PATIENTS 2017	

ID/HIV CAKE IN NEW AND RELAPSE ID PATIENTS, 2017		
	NUMBER	(%)
Patients with known HIV-status who are HIV-positive	4 2 4 6	1%
— on antiretroviral therapy		

DRUG-RESISTANT TB CARE, 2017			
	NEW CASES	PREVIOUSLY TREATED CASES	TOTAL NUMBER
Estimated MDR/RR-TB cases among notified pulmonary TB cases	ses ^d	(46	58 000 000–69 000)
Estimated % of TB cases with MDR/RR-TB	7.1% (5.6–8.7)	24% (20–28)	
% notified tested for rifampicin resistance	12%	69%	108 270
MDR/RR-TB cases tested for resi	istance to secon	d-line drugs	
Laboratory-confirmed cases		MDR/RR-TB: 13	069, XDR-TB:
Patients started on treatment ^e		MDR/RR-TB: 5	943, XDR-TB:

TREATMENT SUCCESS RATE AND COHORT SIZE SUCCESS COHORT 778 493 New and relapse cases registered in 2016 93% Previously treated cases, excluding relapse, registered in 2016 81% 5 3 4 9 HIV-positive TB cases registered in 2016 51% 4 612 MDR/RR-TB cases started on second-line treatment in 2015 41% 5 691

XDR-TB cases started on second-line treatment in 2015

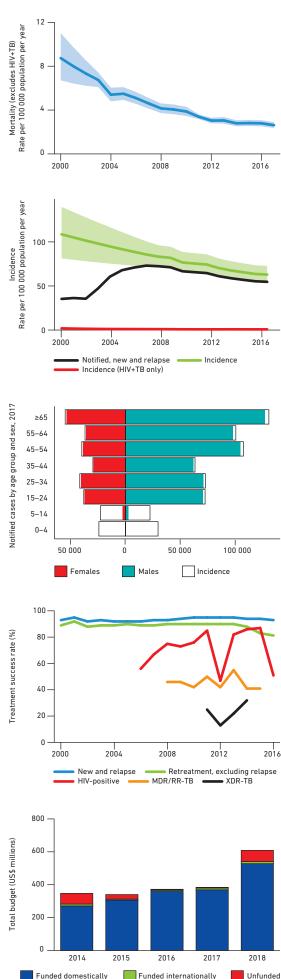
TB PREVENTIVE TREATMENT, 2017

% of HIV-positive people (newly enrolled in care) on preventive treatment % of children (aged < 5) household contacts of

bacteriologically-confirmed TB cases on preventive treatment

TB FINANCING, 2018	
National TB budget (US\$ millions)	609
Funding source:	87% domestic, 2% international, 11% unfunded

POPULATION 2017 1 410 MILLION



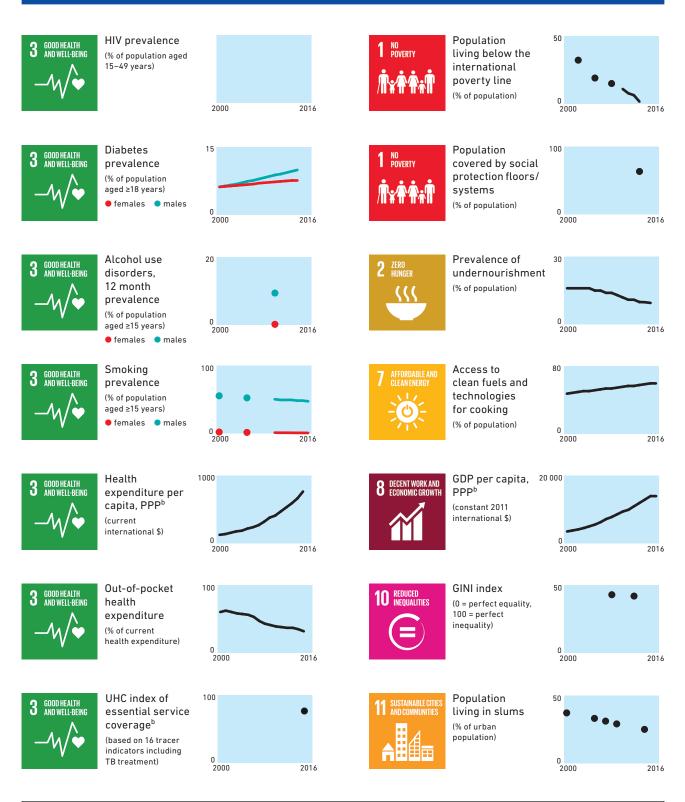
Data are as reported to WHO. Estimates of TB and MDR/RR-TB burden are produced by WHO in consultation with countries. Estimates are rounded and totals are computed prior to rounding. ^a Ranges represent uncertainty intervals.

MDR is TB resistant to rifampicin and isoniazid; RR is TB resistant to rifampicin. Includes cases with unknown previous TB treatment history.

^d The estimated number of MDR/RR-TB cases among bacteriologically confirmed pulmonary cases is 21 000 (17 000-25 000).

^e Includes patients diagnosed before 2017 and patients who were not laboratory-confirmed.

GLOBAL TUBERCULOSIS REPORT 2018



Targets for reductions in TB incidence and TB deaths set in WHO's End TB Strategy and the United Nations' Sustainable Development Goals (SDGs) are ambitious. Achieving them requires progress in reducing health-related risk factors for TB infection and disease, as well as broader social and economic determinants of TB infection and disease. WHO has developed a TB-SDG monitoring framework that comprises 14 indicators under seven SDGs for which there is evidence of an association with TB incidence. Further details are provided in **Chapter 2**.

^a Data sources: SDG indicators database, The World Bank, World Health Organization. Missing values and empty boxes indicate data not available in these data sources.

Democratic People's Republic of Korea POPULATION 2017 25 MILLION

ESTIMATES OF TB BURDEN, ^a 2	2017			
	NUMBER (THO	USANDS)	RATE (PER 100 000	POPULATION)
Mortality (excludes HIV+T	B) 16 (11–	-22)	63 (43-	-86)
Mortality (HIV+TB only)	0.044 (0.022	2–0.072)	0.17 (0.09	-0.28)
ncidence (includes HIV+T	TB) 131 (114-	–149)	513 (446-	-584)
ncidence (HIV+TB only)	0.17 (0.094	-0.28)	0.69 (0.3	7–1.1)
ncidence (MDR/RR-TB) ^b	5.2 (2.6-	-8.8)	20 (10-	-34)
ESTIMATED TB INCIDENCE BY	AGE AND SEX (THOUS	SANDS),ª 2017		
	0–14 YEARS	> 14 YEARS		TOTAL
emales	6.2 (6-6.4)	43 (40-47) 50	(45–54)
Males	8.4 (8.1–8.6)	73 (66–80) 81	(73–90)
Total	15 (14–15)	116 (101–13	1) 131	(114–149)
TB CASE NOTIFICATIONS, 201	7			
Total cases notified				107 10
Total new and relapse				100 55
— % tested with rapid	diagnostics at tim	ne of diagnosis	;	
— % with known HIV s	-			
— % pulmonary				81
— % bacteriologically	confirmed among	nulmonary		50
	committee among	j putitional y		50
UNIVERSAL HEALTH COVERAG	GE AND SOCIAL PROTE	CTION		
TB treatment coverage (n	otified/estimated	incidence). 20	17	77% (68–8
TB patients facing catastr				
TB/HIV CARE IN NEW AND REL	LAPSE TB PATIENTS, 2	2017		
			NUMBER	(9/)
			NOMBER	(%)
Patients with known HIV-s	status who are HI	V-positive	NONDER	(76)
Patients with known HIV-s — on antiretroviral the		V-positive	NONDER	(70)
	erapy	V-positive	NORDER	(76)
	erapy		Y TREATED CASES	
— on antiretroviral the DRUG-RESISTANT TB CARE, 2 Estimated MDR/RR-TB ca	erapy 2017 NEW CAS ses		Y TREATED CASES	TOTAL NUMBE
— on antiretroviral the DRUG-RESISTANT TB CARE, 2 Estimated MDR/RR-TB car among notified pulmonary	erapy 2017 NEW CAS ses y TB cases	SES PREVIOUSI	Y TREATED CASES	TOTAL NUMBE
— on antiretroviral the DRUG-RESISTANT TB CARE, 2 Estimated MDR/RR-TB ca among notified pulmonary Estimated % of TB cases	erapy 2017 NEW CAS ses	SES PREVIOUSI	Y TREATED CASES	TOTAL NUMBE
— on antiretroviral the DRUG-RESISTANT TB CARE, 2 Estimated MDR/RR-TB car among notified pulmonary Estimated % of TB cases with MDR/RR-TB % notified tested for	erapy 2017 NEW CAS ses y TB cases	SES PREVIOUSI	Y TREATED CASES	TOTAL NUMBE 4 10 (2 300-5 80
— on antiretroviral the DRUG-RESISTANT TB CARE, 2 Estimated MDR/RR-TB car among notified pulmonary Estimated % of TB cases with MDR/RR-TB % notified tested for rifampicin resistance	erapy 2017 NEW CAS ses y TB cases 2.2% (0.82	SES PREVIOUSI 2-4.2) 16%	Y TREATED CASES 5 (9.1–25) 14%	TOTAL NUMBE 4 10 (2 300-5 80
— on antiretroviral the DRUG-RESISTANT TB CARE, 2 Estimated MDR/RR-TB ca among notified pulmonary Estimated % of TB cases with MDR/RR-TB % notified tested for rifampicin resistance MDR/RR-TB cases tested	erapy 2017 NEW CAS ses y TB cases 2.2% (0.82 for resistance to s	SES PREVIOUSI 2–4.2) 16% second-line dr	Y TREATED CASES 5 (9.1–25) 14% ugs	TOTAL NUMBE 4 10 (2 300-5 800 2 11
— on antiretroviral the DRUG-RESISTANT TB CARE, 2 Estimated MDR/RR-TB car among notified pulmonary Estimated % of TB cases with MDR/RR-TB % notified tested for rifampicin resistance MDR/RR-TB cases tested Laboratory-confirmed car	erapy 2017 NEW CAS ses y TB cases 2.2% (0.82 for resistance to s ses	SES PREVIOUSI 2–4.2) 16% second-line dr Mi	Y TREATED CASES 5 (9.1–25) 14% ugs DR/RR-TB: 1 5	TOTAL NUMBE 4 10 (2 300-5 80 2 11 ;15, XDR-TB:
— on antiretroviral the DRUG-RESISTANT TB CARE, 2 Estimated MDR/RR-TB car among notified pulmonary Estimated % of TB cases with MDR/RR-TB % notified tested for rifampicin resistance MDR/RR-TB cases tested Laboratory-confirmed car	erapy 2017 NEW CAS ses y TB cases 2.2% (0.82 for resistance to s ses	SES PREVIOUSI 2–4.2) 16% second-line dr Mi	Y TREATED CASES 5 (9.1–25) 14% ugs	TOTAL NUMBE 4 10 (2 300-5 80) 2 11 515, XDR-TB:
— on antiretroviral the DRUG-RESISTANT TB CARE, 2 Estimated MDR/RR-TB car among notified pulmonary Estimated % of TB cases with MDR/RR-TB % notified tested for rifampicin resistance MDR/RR-TB cases tested Laboratory-confirmed car	erapy 2017 NEW CAS ses y TB cases 2.2% (0.82 for resistance to s ses nent ^d	SES PREVIOUSI 2–4.2) 16% second-line dr Mi	Y TREATED CASES 5 (9.1–25) 14% ugs DR/RR-TB: 1 5 R/RR-TB: 1 73	TOTAL NUMBE 4 10 (2 300-5 80 2 11 ;15, XDR-TB: 32, XDR-TB: 1
— on antiretroviral the DRUG-RESISTANT TB CARE , 2 Estimated MDR/RR-TB ca- among notified pulmonary Estimated % of TB cases with MDR/RR-TB % notified tested for "ifampicin resistance MDR/RR-TB cases tested Laboratory-confirmed ca- Patients started on treatm TREATMENT SUCCESS RATE A	erapy 2017 NEW CAS ses y TB cases 2.2% (0.82 for resistance to s ses nent ^d ND COHORT SIZE	SES PREVIOUSI 2–4.2) 16% second-line dr Mi	Y TREATED CASES 5 (9.1–25) 14% ugs DR/RR-TB: 1 5	TOTAL NUMBE 4 10 (2 300-5 80 2 11 ;15, XDR-TB: 32, XDR-TB: 1
— on antiretroviral the DRUG-RESISTANT TB CARE, 2 Estimated MDR/RR-TB ca- among notified pulmonary Estimated % of TB cases with MDR/RR-TB % notified tested for "ifampicin resistance MDR/RR-TB cases tested Laboratory-confirmed case Patients started on treatm TREATMENT SUCCESS RATE A New cases registered in 2	erapy 2017 NEW CAS ses y TB cases 2.2% (0.82 for resistance to s ses nent ^d ND COHORT SIZE	SES PREVIOUSI 2–4.2) 16% second-line dr MD	Y TREATED CASES 5 (9.1–25) 14% ugs DR/RR-TB: 1 5 R/RR-TB: 1 73	TOTAL NUMBE 4 10 (2 300–5 80) 2 11 ;15, XDR-TB: 32, XDR-TB: 1
— on antiretroviral the DRUG-RESISTANT TB CARE, 2 Estimated MDR/RR-TB ca- among notified pulmonary Estimated % of TB cases with MDR/RR-TB % notified tested for "ifampicin resistance MDR/RR-TB cases tested Laboratory-confirmed ca- Patients started on treatm TREATMENT SUCCESS RATE A New cases registered in 2 Previously treated cases in	erapy 2017 NEW CAS ses y TB cases 2.2% (0.82 for resistance to s ses nent ^d ND COHORT SIZE 2016 registered in 2016	SES PREVIOUSI 2–4.2) 16% second-line dr MD	Y TREATED CASES 5 (9.1–25) 14% ugs DR/RR-TB: 1 5 R/RR-TB: 1 73	TOTAL NUMBE 4 10 (2 300–5 80) 2 11 ;15, XDR-TB: 32, XDR-TB: 1
— on antiretroviral the DRUG-RESISTANT TB CARE, 2 Estimated MDR/RR-TB ca among notified pulmonary Estimated % of TB cases with MDR/RR-TB % notified tested for rifampicin resistance MDR/RR-TB cases tested Laboratory-confirmed case Patients started on treatm TREATMENT SUCCESS RATE A New cases registered in 2 Previously treated cases registered HIV-positive TB cases reg	erapy 2017 NEW CAS ses y TB cases 2.2% (0.82 for resistance to s ses nent ^d ND COHORT SIZE 2016 registered in 2016	SES PREVIOUSI 2–4.2) 16% second-line dr MD	Y TREATED CASES ; (9.1–25) 14% ugs DR/RR-TB: 1 5 R/RR-TB: 1 73 SUCCES:	ТОТАL NUMBE 4 10 (2 300-5 80) 2 11 ;15, XDR-TB: 32, XDR-TB: 1 ;5 соног
— on antiretroviral the DRUG-RESISTANT TB CARE, 2 Estimated MDR/RR-TB ca among notified pulmonary Estimated % of TB cases with MDR/RR-TB % notified tested for "ifampicin resistance MDR/RR-TB cases tested Laboratory-confirmed case Patients started on treatm TREATMENT SUCCESS RATE A New cases registered in 2 Previously treated cases reg MDR/RR-TB cases started	erapy 2017 NEW CAS ses y TB cases 2.2% (0.8% for resistance to s ses nent ^d ND COHORT SIZE 2016 registered in 2016 istered in 2016 d on second-line to	SES PREVIOUSI 2–4.2) 16% second-line dr MD MD	Y TREATED CASES ; (9.1–25) 14% ugs DR/RR-TB: 1 5 R/RR-TB: 1 73 SUCCES:	ТОТАL NUMBE 4 10 (2 300-5 80) 2 11 ;15, XDR-TB: 32, XDR-TB: 1 ;5 соног
— on antiretroviral the DRUG-RESISTANT TB CARE, 2 Estimated MDR/RR-TB ca among notified pulmonary Estimated % of TB cases with MDR/RR-TB % notified tested for rifampicin resistance MDR/RR-TB cases tested Laboratory-confirmed case Patients started on treatm TREATMENT SUCCESS RATE A New cases registered in 2 Previously treated cases reg MDR/RR-TB cases started	erapy 2017 NEW CAS ses y TB cases 2.2% (0.8% for resistance to s ses nent ^d ND COHORT SIZE 2016 registered in 2016 istered in 2016 d on second-line to	SES PREVIOUSI 2–4.2) 16% second-line dr MD MD	Y TREATED CASES ; (9.1–25) 14% ugs DR/RR-TB: 1 5 R/RR-TB: 1 73 SUCCES:	TOTAL NUMBE 4 10 (2 300-5 80 2 11 ;15, XDR-TB: 32, XDR-TB: 1
— on antiretroviral the DRUG-RESISTANT TB CARE, 2 Estimated MDR/RR-TB ca among notified pulmonary Estimated % of TB cases with MDR/RR-TB % notified tested for rifampicin resistance MDR/RR-TB cases tested Laboratory-confirmed case Patients started on treatm TREATMENT SUCCESS RATE A New cases registered in 2 Previously treated cases reg MDR/RR-TB cases started	erapy 2017 NEW CAS ses y TB cases 2.2% (0.8% for resistance to s ses nent ^d ND COHORT SIZE 2016 registered in 2016 istered in 2016 d on second-line treatr	SES PREVIOUSI 2–4.2) 16% second-line dr MD MD	Y TREATED CASES ; (9.1–25) 14% ugs DR/RR-TB: 1 5 R/RR-TB: 1 73 SUCCES:	ТОТАL NUMBE 4 10 (2 300-5 80) 2 11 ;15, XDR-TB: 32, XDR-TB: 1 ;5 соног
— on antiretroviral the DRUG-RESISTANT TB CARE, 2 Estimated MDR/RR-TB ca- among notified pulmonary Estimated % of TB cases with MDR/RR-TB % notified tested for rifampicin resistance MDR/RR-TB cases tested Laboratory-confirmed ca- Patients started on treatm TREATMENT SUCCESS RATE A New cases registered in 2 Previously treated cases reg MDR/RR-TB cases started NEW cases started on treatment TREATMENT SUCCESS RATE A New cases registered in 2 Previously treated cases reg MDR/RR-TB cases started MDR/RR-TB cases started on treatment, TB PREVENTIVE TREATMENT,	erapy 2017 NEW CAS ses y TB cases 2.2% (0.82 for resistance to s ses nent ^d ND COHORT SIZE 2016 registered in 2016 istered in 2016 d on second-line treatr 2017	SES PREVIOUSI 2-4.2) 16% second-line dr MD MD	Y TREATED CASES ; (9.1–25) 14% ugs DR/RR-TB: 1 5 SUCCESS 115 73%	ТОТАL NUMBE 4 10 (2 300-5 80) 2 11 ;15, XDR-TB: 12, XDR-TB: 1 52, XDR-TB: 1 55 СОНОК 32
— on antiretroviral the DRUG-RESISTANT TB CARE, 2 Estimated MDR/RR-TB ca among notified pulmonary Estimated % of TB cases with MDR/RR-TB % notified tested for rifampicin resistance MDR/RR-TB cases tested Laboratory-confirmed case Patients started on treatm TREATMENT SUCCESS RATE A New cases registered in 2 Previously treated cases reg MDR/RR-TB cases started on Started cases reg	erapy 2017 NEW CAS ses y TB cases 2.2% (0.8% for resistance to s ses nent ^d ND COHORT SIZE 2016 registered in 2016 istered in 2016 d on second-line treatr second-line treatr 2017 newly enrolled in	SES PREVIOUS 2–4.2) 16% second-line dr MD MD 5 reatment in 20 5 care) on preve	Y TREATED CASES ; (9.1–25) 14% ugs DR/RR-TB: 1 5 SUCCESS 115 73%	ТОТАL NUMBI 4 1((2 300–5 80 2 1 ⁻ 315, XDR-TB: 32, XDR-TB: 5 СОНОВ 32

5 300
Mortality (excludes HIV+TB) Rate per 100 000 population per year
000 popul
Mortality
2000 2004 2008 2012 2016
- 004 ngg
Bate per 100 000 population per year
Notified, new and relapse Incidence Incidence (HIV+TB only)
22
265 265 55-64 45-54 35-44 45-54 35-44 25-34 55-64 45-54 55-64 55-75 55-75 55-75 55-75 55-75 55-75 55-75 55-75 55-75 55-75 55-75 55-75 55-75
Pr 25-34 Pr 15-24
Females Males Incidence
100
80 - 40 - 40 - 40 - 40 - 40 - 40 - 40 -
ss 60
ق 20 — 20 —
0
New and relapse MDR/RR-TB MDR/RR-TB
(102 80
0 2014 2015 2016 2017 2018
Funded domestically Funded internationally Unfunded

Data are as reported to WHO. Estimates of TB and MDR/RR-TB burden are produced by WHO in

consultation with countries. Estimates are rounded and totals are computed prior to rounding. b

Ranges represent uncertainty intervals. MDR is TB resistant to rifampicin and isoniazid; RR is TB resistant to rifampicin. Includes cases with unknown previous TB treatment history. Includes patients diagnosed before 2017 and patients who were not laboratory-confirmed. Reasons for higher than expected coverage might be that the numerator did not exclude non-

household contacts or children of five years and older.

84

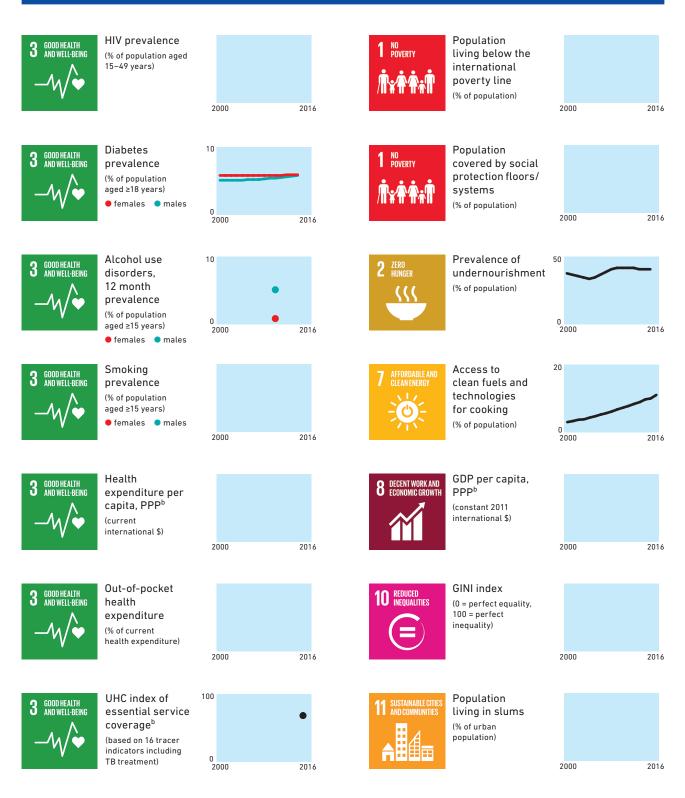
7% domestic, 1% international, 92% unfunded

180

TB FINANCING, 2018

Funding source:

National TB budget (US\$ millions)



Targets for reductions in TB incidence and TB deaths set in WHO's End TB Strategy and the United Nations' Sustainable Development Goals (SDGs) are ambitious. Achieving them requires progress in reducing health-related risk factors for TB infection and disease, as well as broader social and economic determinants of TB infection and disease. WHO has developed a TB-SDG monitoring framework that comprises 14 indicators under seven SDGs for which there is evidence of an association with TB incidence. Further details are provided in **Chapter 2**.

^a Data sources: SDG indicators database, The World Bank, World Health Organization. Missing values and empty boxes indicate data not available in these data sources.

Democratic Republic of the Congo

ESTIMATES OF TB BURDEN, ^a 2017		
	NUMBER (THOUSANDS)	RATE (PER 100 000 POPULATION)
Mortality (excludes HIV+TB)	49 (29–74)	60 (35–90)
Mortality (HIV+TB only)	7.5 (3.5–13)	9.2 (4.3–16)
Incidence (includes HIV+TB)	262 (169-374)	322 (208-460)
Incidence (HIV+TB only)	20 (13–29)	25 (16–35)
Incidence (MDR/RR-TB)**	7.5 (3.3–13)	9.2 (4–17)
	7.5 (5.5-15)	9.2 (4-17)

ESTIMATED TB INCIDENCE BY AGE AND SEX (THOUSANDS), ² 2017			
	0–14 YEARS	> 14 YEARS	TOTAL
Females	16 (14–17)	84 (65–102)	99 (76–123)
Males	17 (16–19)	145 (103–187)	162 (112–212)
Total	33 (28–37)	229 (145–313)	262 (169–374)

TB CASE NOTIFICATIONS, 2017	
Total cases notified	151 832
Total new and relapse	150 085
— % tested with rapid diagnostics at time of diagnosis	
— % with known HIV status	64%
— % pulmonary	83%
— % bacteriologically confirmed among pulmonary	80%
UNIVERSAL HEALTH COVERAGE AND SOCIAL PROTECTION	
TB treatment coverage (notified/estimated incidence), 2017	57% (40-89)
TB patients facing catastrophic total costs	
TB case fatality ratio (estimated mortality/estimated incidence), 2017	0.22 (0.11–0.35)

TB/HIV CARE IN NEW AND RELAPSE TB PATIENTS, 2017	NUMBER	(%)
Patients with known HIV-status who are HIV-positive	9 688	10%
— on antiretroviral therapy	7 982	82%

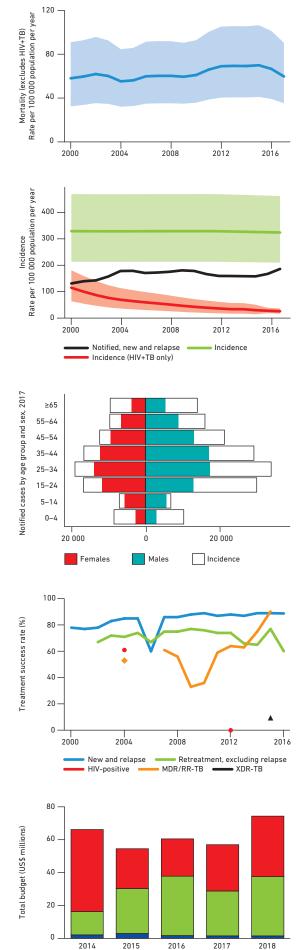
DRUG-RESISTANT TB CARE, 2017			
	NEW CASES	PREVIOUSLY TREATED CASES	TOTAL NUMBER ^e
Estimated MDR/RR-TB cases among notified pulmonary TB cas	ses		3 400 (2 000–4 900)
Estimated % of TB cases with MDR/RR-TB	2.2% (1–3.5)	9.5% (8.8–10)	
% notified tested for rifampicin resistance	3%	57%	10 543
MDR/RR-TB cases tested for resi	stance to secon	d-line drugs	147
Laboratory-confirmed cases		MDR/RR-TB: 8	93, XDR-TB: 19
Patients started on treatment ^d		MDR/RR-TB: 8	39, XDR-TB: 15

TREATMENT SUCCESS RATE AND COHORT SIZE		
	SUCCESS	COHORT
New and relapse cases registered in 2016	89%	127 503
Previously treated cases, excluding relapse, registered in 2016	60%	789
HIV-positive TB cases registered in 2016		
MDR/RR-TB cases started on second-line treatment in 2015	90%	463
XDR-TB cases started on second-line treatment in 2015	10%	21

TB PREVENTIVE TREATMENT, 2017

% of HIV-positive people (newly enrolled in care) on preventive treatment % of children (aged < 5) household contacts of 15% (14-17) bacteriologically-confirmed TB cases on preventive treatment

TB FINANCING, 2018	
National TB budget (US\$ millions)	74
Funding source:	2% domestic, 48% international, 49% unfunded



Data are as reported to WHO. Estimates of TB and MDR/RR-TB burden are produced by WHO in consultation with countries. Estimates are rounded and totals are computed prior to rounding.
^a Ranges represent uncertainty intervals.

⁶ MDR is TB resistant to rifampicin and isoniazid; RR is TB resistant to rifampicin.
⁶ Includes cases with unknown previous TB treatment history.
^d Includes patients diagnosed before 2017 and patients who were not laboratory-confirmed.

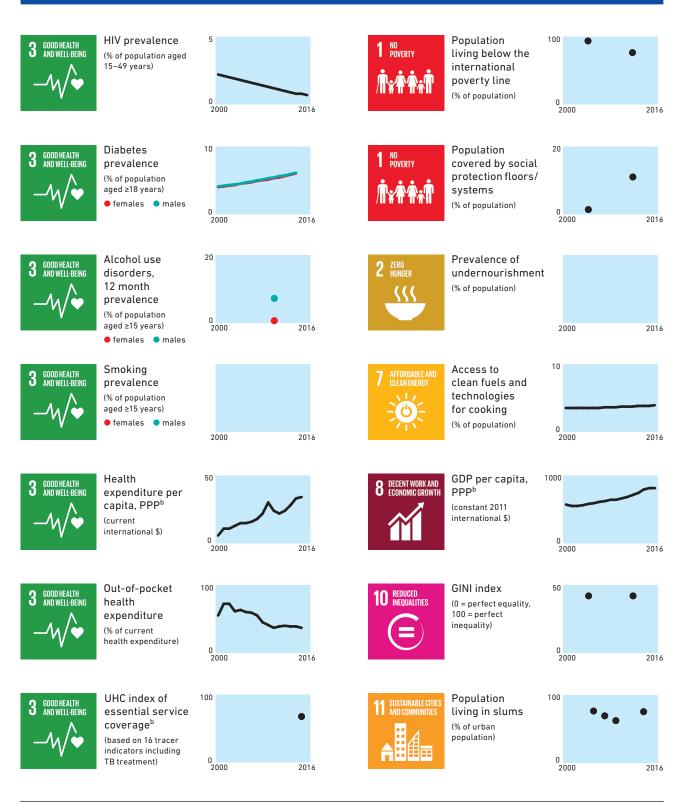
182

Funded internationally

Unfunded

Funded domestically

POPULATION 2017 81 MILLION



Targets for reductions in TB incidence and TB deaths set in WHO's End TB Strategy and the United Nations' Sustainable Development Goals (SDGs) are ambitious. Achieving them requires progress in reducing health-related risk factors for TB infection and disease, as well as broader social and economic determinants of TB infection and disease. WHO has developed a TB-SDG monitoring framework that comprises 14 indicators under seven SDGs for which there is evidence of an association with TB incidence. Further details are provided in **Chapter 2**.

^a Data sources: SDG indicators database, The World Bank, World Health Organization. Missing values and empty boxes indicate data not available in these data sources.

Ethiopia

NUMBER (THOUSANDS)	RATE (PER 100 000 POPULATION)
25 (16–37)	24 (15–35)
3.6 (2.5–5)	3.5 (2.4-4.8)
172 (121–232)	164 (115–221)
12 (8.6–17)	12 (8.2–16)
5.5 (2.9-8.9)	5.2 (2.8-8.4)
	25 (16-37) 3.6 (2.5-5) 172 (121-232) 12 (8.6-17)

ESTIMATED TB INCIDENCE BY AGE AND SEX (THOUSANDS), ^a 2017				
	0–14 YEARS	> 14 YEARS	TOTAL	
Females	9.5 (8.7–10)	69 (55–83)	78 (61–95)	
Males	10 (9.6–11)	83 (65–102)	94 (71–116)	
Total	20 (18–22)	152 (106–198)	172 (121–232)	

TB CASE NOTIFICATIONS, 2017		
Total cases notified		117 705
Total new and relapse		116 725
— % tested with rapid diagnostics at time of diagnos	is	
— % with known HIV status		86%
— % pulmonary		69%
— % bacteriologically confirmed among pulmonary		58%
UNIVERSAL HEALTH COVERAGE AND SOCIAL PROTECTION		
TB treatment coverage (notified/estimated incidence), 2	017	68% (50-96)
TB patients facing catastrophic total costs		
TB case fatality ratio (estimated mortality/estimated incidence), 2017		0.17 (0.1–0.26)
TB/HIV CARE IN NEW AND RELAPSE TB PATIENTS, 2017		
	NUMBER	(%)
Patients with known HIV-status who are HIV-positive	7 272	7%
— on antiretroviral therapy	6 673	92%

DRUG-RESISTANT TB CARE, 2017			
	NEW CASES	PREVIOUSLY TREATED CASES	TOTAL NUMBER ^C
Estimated MDR/RR-TB cases among notified pulmonary TB cas	ses		2 700 (1 700-3 700)
Estimated % of TB cases with MDR/RR-TB	2.7% (1.6–4.1)	14% (6.7–25)	
% notified tested for rifampicin resistance			38 501
MDR/RR-TB cases tested for resi	stance to secon	d-line drugs	205
Laboratory-confirmed cases		MDR/RR-TB: 6	80, XDR-TB: 4
Patients started on treatment ^d		MDR/RR-TB: 6	80, XDR-TB: 4

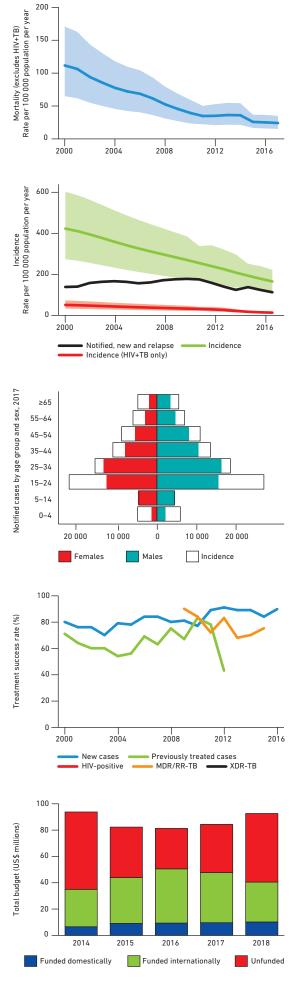
TREATMENT SUCCESS RATE AND COHORT SIZE		
	SUCCESS	COHORT
New cases registered in 2016	90%	123 004
Previously treated cases registered in 2016		
HIV-positive TB cases registered in 2016		
MDR/RR-TB cases started on second-line treatment in 2015	75%	660
XDR-TB cases started on second-line treatment in 2015		

TB PREVENTIVE TREATMENT, 2017 % of HIV-positive people (newly enrolled in care) on preventive treatment 45% % of children (aged < 5) household contacts of 11% (9.9–12)

bacteriologically-confirmed TB cases on preventive treatment	11% (9.9-

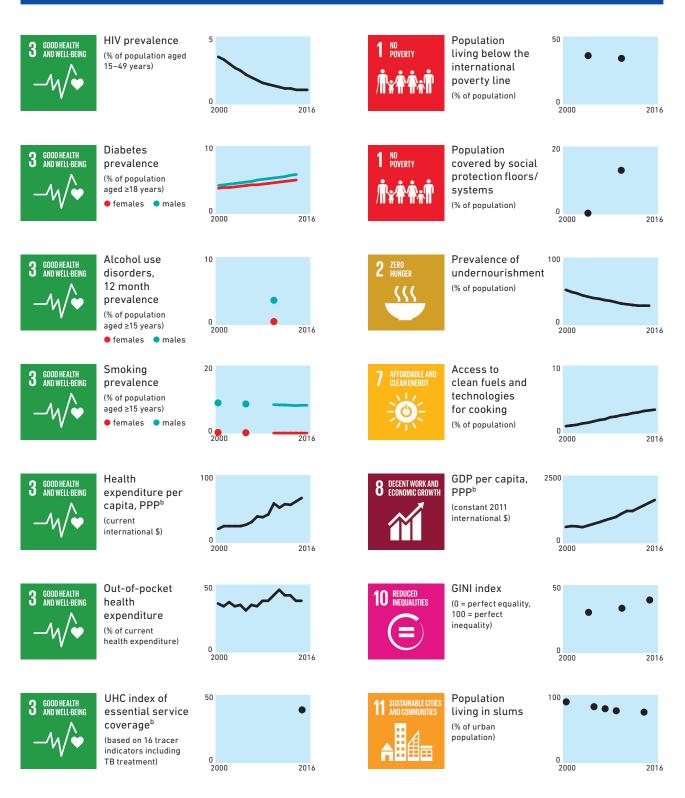
93
11% domestic, 33% international, 56% unfunded

POPULATION 2017 105 MILLION



Data are as reported to WHO. Estimates of TB and MDR/RR-TB burden are produced by WHO in consultation with countries. Estimates are rounded and totals are computed prior to rounding.
^a Ranges represent uncertainty intervals.

⁶ MDR is TB resistant to rifampicin and isoniazid; RR is TB resistant to rifampicin.
⁶ Includes cases with unknown previous TB treatment history.
^d Includes patients diagnosed before 2017 and patients who were not laboratory-confirmed.



Targets for reductions in TB incidence and TB deaths set in WHO's End TB Strategy and the United Nations' Sustainable Development Goals (SDGs) are ambitious. Achieving them requires progress in reducing health-related risk factors for TB infection and disease, as well as broader social and economic determinants of TB infection and disease. WHO has developed a TB-SDG monitoring framework that comprises 14 indicators under seven SDGs for which there is evidence of an association with TB incidence. Further details are provided in Chapter 2.

^a Data sources: SDG indicators database, The World Bank, World Health Organization. Missing values and empty boxes indicate data not available in these data sources.

India

ESTIMATES OF TB BURDEN, ^a 2017		
	NUMBER (THOUSANDS)	RATE (PER 100 000 POPULATION)
Mortality (excludes HIV+TB)	410 (381–441)	31 (28–33)
Mortality (HIV+TB only)	11 (6.5–16)	0.79 (0.48-1.2)
Incidence (includes HIV+TB)	2 740 (1 870-3 770)	204 (140–281)
Incidence (HIV+TB only)	86 (57–120)	6.4 (4.3-9)
Incidence (MDR/RR-TB)**	135 (78–208)	10 (5.8–16)

ESTIMATED TB INCIDENCE BY AGE AND SEX (THOUSANDS),^a 2017

	0–14 YEARS	> 14 YEARS	TOTAL
Females	107 (100–114)	847 (684–1 010)	954 (759–1 150)
Males	117 (109–126)	1 670 (1 220-2 120)	1 780 (1 290-2 280)
Total	224 (202–247)	2 510 (1 680–3 350)	2 740 (1 870–3 770)

TB CASE NOTIFICATIONS, 2017	
Total cases notified	1 908 371
Total new and relapse	1 786 681
— % tested with rapid diagnostics at time of diagnosis	40%
— % with known HIV status	64%
— % pulmonary	85%
— % bacteriologically confirmed among pulmonary	60%
UNIVERSAL HEALTH COVERAGE AND SOCIAL PROTECTION	
TB treatment coverage (notified/estimated incidence), 2017	65% (47–96)
TB patients facing catastrophic total costs	
TB case fatality ratio (estimated mortality/estimated incidence), 2017	0.16 (0.11-0.22)

TB/HIV CARE IN NEW AND RELAPSE TB PATIENTS, 2017			
	NUMBER	(%)	
Patients with known HIV-status who are HIV-positive	36 440	3%	
— on antiretroviral therapy	28 651	79%	

DRUG-RESISTANT TB CARE, 2017			
	NEW CASES	PREVIOUSLY TREATED CASES	TOTAL NUMBER ^C
Estimated MDR/RR-TB cases among notified pulmonary TB cas	es	(54	65 000 4 000–76 000)
Estimated % of TB cases with MDR/RR-TB	2.8% (2-3.5)	12% (10–13)	
% notified tested for rifampicin resistance	32%	82%	720 051
MDR/RR-TB cases tested for resistance to second-line drugs 26 83			26 832
Laboratory-confirmed cases		MDR/RR-TB: 39 009, 3	(DR-TB: 2 650
Patients started on treatment ^d		MDR/RR-TB: 35 950,)	(DR-TB: 2 838

TREATMENT SUCCESS RATE AND COHORT SIZE

	SUCCESS	COHORT
New and relapse cases registered in 2016	69%	1 763 876
Previously treated cases, excluding relapse, registered in 2016	70%	172 282
HIV-positive TB cases registered in 2016	75%	39 123
MDR/RR-TB cases started on second-line treatment in 2015	46%	26 966
XDR-TB cases started on second-line treatment in 2015	28%	2 130

TB PREVENTIVE TREATMENT, 2017 % of HIV-positive people (newly enrolled in care) on preventive treatment

% of children (aged < 5) household contacts of bacteriologically-confirmed TB cases on preventive treatment

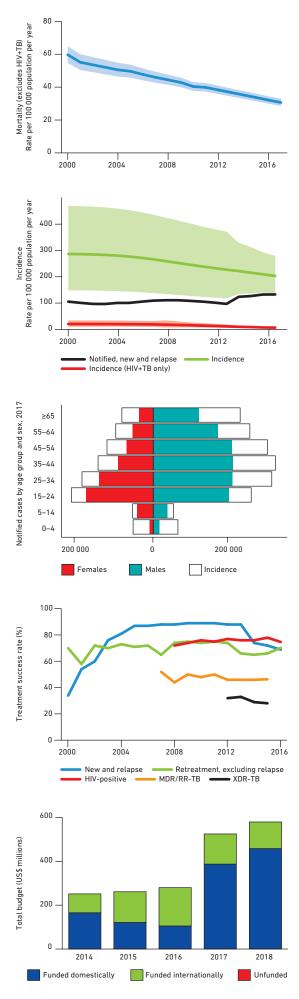
TB FINANCING, 2018	
National TB budget (US\$ millions)	580
Funding source:	79% domestic, 21% international, 0% unfunded

Data are as reported to WHO. Estimates of TB and MDR/RR-TB burden are produced by WHO in consultation with countries. Estimates are rounded and totals are computed prior to rounding. ^a Ranges represent uncertainty intervals. Estimates of TB incidence and mortality for India are interim in nature, pending results from the national TB prevalence survey planned for

- 2019/2020. MDR is TB resistant to rifampicin and isoniazid; RR is TB resistant to rifampicin.

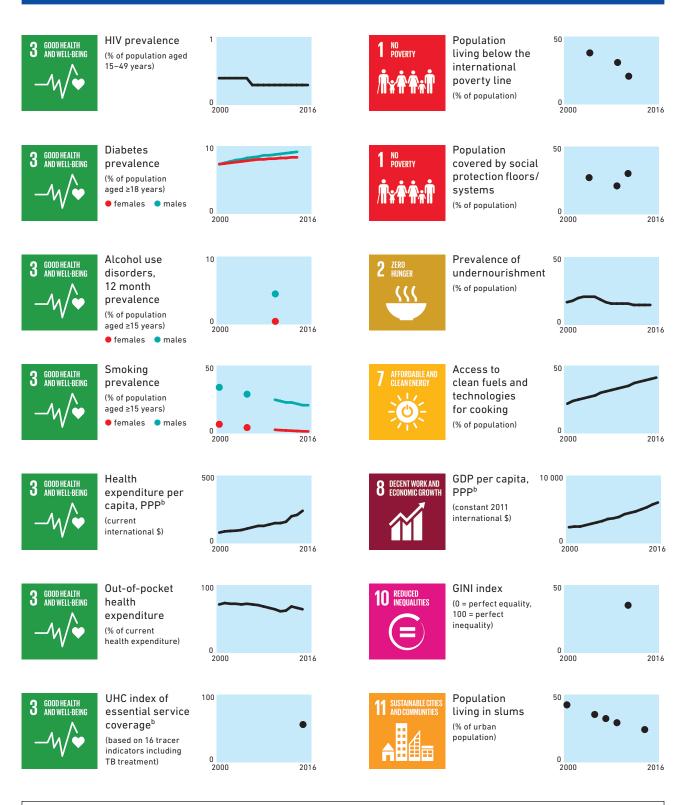
Includes cases with unknown previous TB treatment history. Includes patients diagnosed before 2017 and patients who were not laboratory-confirmed. d

POPULATION 2017 1 339 MILLION



10%

11% (10-12)



Targets for reductions in TB incidence and TB deaths set in WHO's End TB Strategy and the United Nations' Sustainable Development Goals (SDGs) are ambitious. Achieving them requires progress in reducing health-related risk factors for TB infection and disease, as well as broader social and economic determinants of TB infection and disease. WHO has developed a TB-SDG monitoring framework that comprises 14 indicators under seven SDGs for which there is evidence of an association with TB incidence. Further details are provided in **Chapter 2**.

^a Data sources: SDG indicators database, The World Bank, World Health Organization. Missing values and empty boxes indicate data not available in these data sources.

Indonesia

ESTIMATES OF TB BURDEN, ^a 2017		
	NUMBER (THOUSANDS)	RATE (PER 100 000 POPULATION)
Mortality (excludes HIV+TB)	107 (100–114)	40 (38–43)
Mortality (HIV+TB only)	9.4 (5–15)	3.6 (1.9–5.8)
Incidence (includes HIV+TB)	842 (767–919)	319 (291–348)
Incidence (HIV+TB only)	36 (20–57)	14 (7.7–21)
Incidence (MDR/RR-TB) ^b	23 (16–31)	8.8 (6.2–12)

ESTIMATED TB INCIDENCE BY AGE AND SEX (THOUSANDS),^a 2017 0–14 YEARS > 14 YEARS TOTAL Females 23 (23–23) 326 (308-345) 349 (329-370) Males 26 (26-27) 466 (435-497) 492 (458-526) Total 49 (48-50) 792 (723-862) 842 (767-919)

TB CASE NOTIFICATIONS, 2017	
Total cases notified	446 732
Total new and relapse	442 172
— % tested with rapid diagnostics at time of diagnosis	2%
— % with known HIV status	29%
— % pulmonary	90%
— % bacteriologically confirmed among pulmonary	54%
UNIVERSAL HEALTH COVERAGE AND SOCIAL PROTECTION	
TB treatment coverage (notified/estimated incidence), 2017	53% (48–58)
TP nationts facing satastrophic total costs	

IB patients facing catastrophic total costs	
TB case fatality ratio (estimated mortality/estimated incidence), 2017	0.14 (0.12-0.15)

TB/HIV CARE IN NEW AND RELAPSE TB PATIENTS, 2017		
	NUMBER	(%)
Patients with known HIV-status who are HIV-positive	7 729	6%
— on antiretroviral therapy	2 244	29%

DRUG-RESISTANT TB CARE, 2017			
	NEW CASES	PREVIOUSLY TREATED CASES	TOTAL NUMBER ^C
Estimated MDR/RR-TB cases among notified pulmonary TB cas	ses		12 000 (8 600–15 000)
Estimated % of TB cases with MDR/RR-TB	2.4% (1.8-3.3)	13% (9–18)	
% notified tested for rifampicin resistance	16%	223%	112 743
MDR/RR-TB cases tested for resi	stance to secon	d-line drugs	1 813
Laboratory-confirmed cases		MDR/RR-TB: 5 0	70, XDR-TB: 51
Patients started on treatment ^d		MDR/RR-TB: 3 04	42, XDR-TB: 50

TREATMENT SUCCESS RATE AND COHORT SIZE

	SUCCESS	COHORT
New and relapse cases registered in 2016	86%	364 671
Previously treated cases, excluding relapse, registered in 2016	71%	2 002
HIV-positive TB cases registered in 2016	64%	4 470
MDR/RR-TB cases started on second-line treatment in 2015	47%	1 565
XDR-TB cases started on second-line treatment in 2015	28%	32

TB PREVENTIVE TREATMENT, 2017

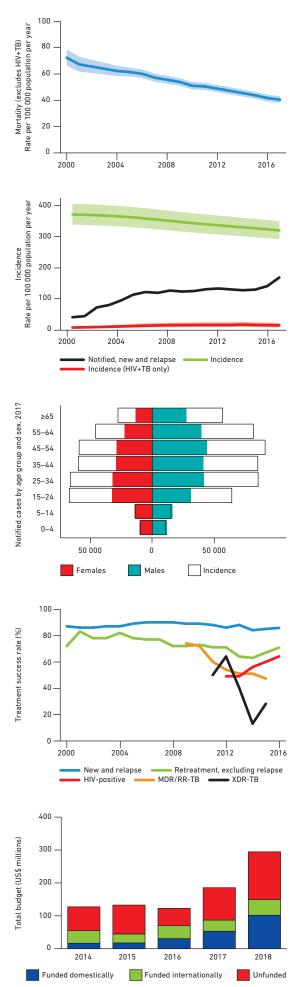
% of HIV-positive people (newly enrolled in care) on preventive treatmet	ent 16%
% of children (aged < 5) household contacts of bacteriologically-confirmed TB cases on preventive treatment	8.5% (7.8–9.3)

TB FINANCING, 2018	
National TB budget (US\$ millions)	294
Funding source:	34% domestic, 16% international, 49% unfunded

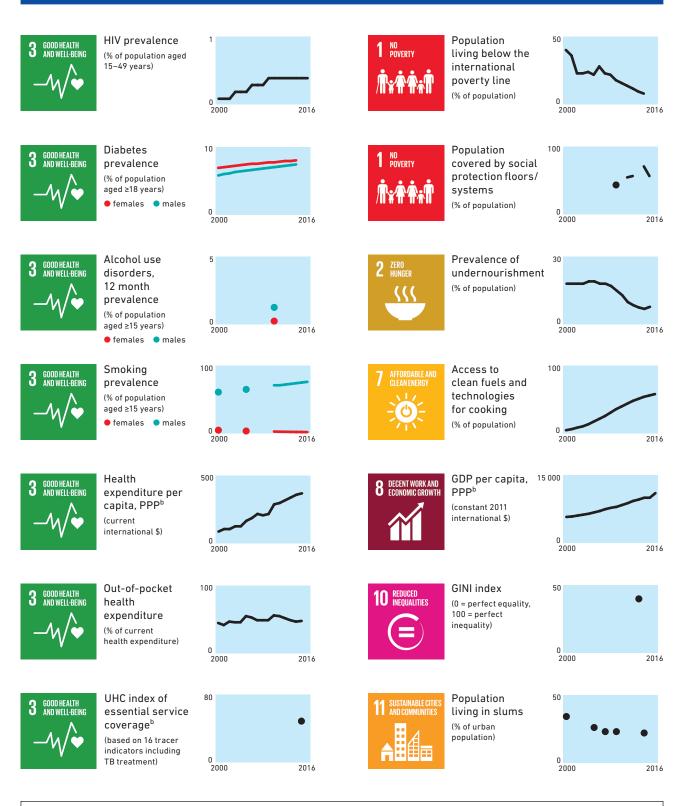
Data are as reported to WHO. Estimates of TB and MDR/RR-TB burden are produced by WHO in consultation with countries. Estimates are rounded and totals are computed prior to rounding.
^a Ranges represent uncertainty intervals.

⁶ MDR is TB resistant to rifampicin and isoniazid; RR is TB resistant to rifampicin.
⁶ Includes cases with unknown previous TB treatment history.
^d Includes patients diagnosed before 2017 and patients who were not laboratory-confirmed.

POPULATION 2017 264 MILLION



188



Targets for reductions in TB incidence and TB deaths set in WHO's End TB Strategy and the United Nations' Sustainable Development Goals (SDGs) are ambitious. Achieving them requires progress in reducing health-related risk factors for TB infection and disease, as well as broader social and economic determinants of TB infection and disease. WHO has developed a TB-SDG monitoring framework that comprises 14 indicators under seven SDGs for which there is evidence of an association with TB incidence. Further details are provided in **Chapter 2**.

^a Data sources: SDG indicators database, The World Bank, World Health Organization. Missing values and empty boxes indicate data not available in these data sources.

Kenya

NUMBER (THOUSANDS)	RATE (PER 100 000 POPULATION)
25 (14-39)	50 (28–78)
18 (11–27)	37 (22–55)
158 (97–235)	319 (195–472)
45 (27–68)	91 (55–137)
2.8 (1.2-4.9)	5.6 (2.5-9.9)
	25 (14-39) 18 (11-27) 158 (97-235) 45 (27-68)

ESTIMATED TB INCIDENCE BY AGE AND SEX (THOUSANDS),* 2017			
0–14 YEARS > 14 YEARS TOTAL			
Females	9.9 (8.8–11)	43 (33–53)	53 (39–66)
Males	11 (9.7–12)	95 (63–127)	106 (68–143)
Total	21 (18–24)	138 (82–193)	158 (97–235)

TB CASE NOTIFICATIONS, 2017	
Total cases notified	85 188
Total new and relapse	83 599
— % tested with rapid diagnostics at time of diagnosis	47%
— % with known HIV status	96%
— % pulmonary	84%
— % bacteriologically confirmed among pulmonary	67%

UNIVERSAL HEALTH CUVERAGE AND SUCIAL PROTECTION	
TB treatment coverage (notified/estimated incidence), 2017	53% (36–86)
TB patients facing catastrophic total costs, 2017	27% (21–32)
TB case fatality ratio (estimated mortality/estimated incidence), 2017	0.28 (0.15-0.45)

	NUMBER	(%)
Patients with known HIV-status who are HIV-positive	22 992	29%
— on antiretroviral therapy	21 763	95%

DRUG-RESISTANT TB CARE, 2017			
	NEW CASES	PREVIOUSLY TREATED CASES	TOTAL NUMBER ^C
Estimated MDR/RR-TB cases among notified pulmonary TB cas	es		1 100 (670–1 500)
Estimated % of TB cases with MDR/RR-TB	1.3% (0.74–2)	4.4% (3.7–5.2)	
% notified tested for rifampicin resistance	46%	52%	39 598
MDR/RR-TB cases tested for resis	stance to secon	d-line drugs	198
Laboratory-confirmed cases		MDR/RR-TB: 3	90, XDR-TB: 1
Patients started on treatment ^d		MDR/RR-TB: 3	94, XDR-TB: 1

TREATMENT SUCCESS RATE AND COHORT SIZE

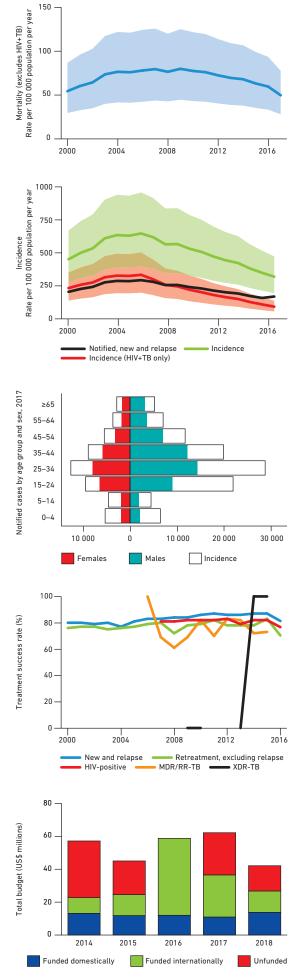
	SUCCESS	COHORT
New and relapse cases registered in 2016	81%	75 705
Previously treated cases, excluding relapse, registered in 2016	70%	1 0 4 8
HIV-positive TB cases registered in 2016	77%	22 502
MDR/RR-TB cases started on second-line treatment in 2015	73%	330
XDR-TB cases started on second-line treatment in 2015	100%	1

TB PREVENTIVE TREATMENT, 2017

% of HIV-positive people (newly enrolled in care) on preventive treatment % of children (aged < 5) household contacts of 26% (24-29) bacteriologically-confirmed TB cases on preventive treatment

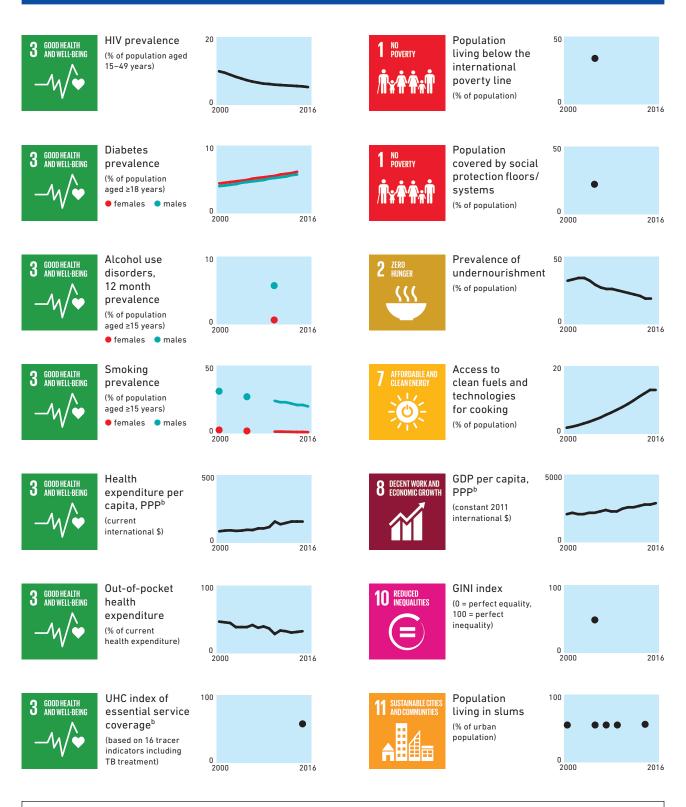
TB FINANCING, 2018 National TB budget (US\$ millions) 42 33% domestic, 31% international, 36% unfunded Funding source:

POPULATION 2017 50 MILLION



Data are as reported to WHO. Estimates of TB and MDR/RR-TB burden are produced by WHO in consultation with countries. Estimates are rounded and totals are computed prior to rounding.
^a Ranges represent uncertainty intervals.

⁶ MDR is TB resistant to rifampicin and isoniazid; RR is TB resistant to rifampicin.
⁶ Includes cases with unknown previous TB treatment history.
^d Includes patients diagnosed before 2017 and patients who were not laboratory-confirmed.



Targets for reductions in TB incidence and TB deaths set in WHO's End TB Strategy and the United Nations' Sustainable Development Goals (SDGs) are ambitious. Achieving them requires progress in reducing health-related risk factors for TB infection and disease, as well as broader social and economic determinants of TB infection and disease. WHO has developed a TB-SDG monitoring framework that comprises 14 indicators under seven SDGs for which there is evidence of an association with TB incidence. Further details are provided in **Chapter 2**.

^a Data sources: SDG indicators database, The World Bank, World Health Organization. Missing values and empty boxes indicate data not available in these data sources.

Mozambique

ESTIMATES OF TB BURDEN, ^a 2017		
	NUMBER (THOUSANDS)	RATE (PER 100 000 POPULATION)
Mortality (excludes HIV+TB)	22 (13–33)	73 (43–111)
Mortality (HIV+TB only)	27 (17–39)	90 (56–131)
Incidence (includes HIV+TB)	163 (106–233)	551 (356–787)
Incidence (HIV+TB only)	66 (42–95)	221 (141–319)
Incidence (MDR/RR-TB)**	8.8 (4.6-14)	30 (15-48)

ESTIMATED TB INCIDENCE BY AGE AND SEX (THOUSANDS), ^a 2017			
	0–14 YEARS	> 14 YEARS	TOTAL
Females	11 (9.6–12)	51 (40-63)	62 (47–77)
Males	12 (11–13)	90 (64–115)	101 (70–133)
Total	23 (19–26)	141 (90–192)	163 (106–233)

86 515
85 376
96%
93%
40%
52% (37–81)
0.31 (0.17–0.46)

TB/HIV CARE IN NEW AND RELAPSE TE	B PATIENTS, 2017		
		NUMBER	(%)
Patients with known HIV-status v	who are HIV-posi	itive 33 514	40%
— on antiretroviral therapy		31 790	95%
DRUG-RESISTANT TB CARE, 2017			
	NEW CASES	PREVIOUSLY TREATED CASES	TOTAL NUMBER
Estimated MDR/RR-TB cases among notified pulmonary TB ca	ses		4 100 (2 500-5 700)
Estimated % of TB cases with MDR/RR-TB	3.7% (2.5-5.2)	20% (5.2–40)	
% notified tested for rifampicin resistance			
MDR/RR-TR cases tested for res	istance to secon	d-line drugs	209

MDR/RR-TB cases tested for resistance to sec	ond-line drugs 209
Laboratory-confirmed cases	MDR/RR-TB: 861, XDR-TB: 31
Patients started on treatment ****	MDR/RR-TB: 907, XDR-TB: 31
TDEATMENT SUCCESS DATE AND COUNDT SIZE	

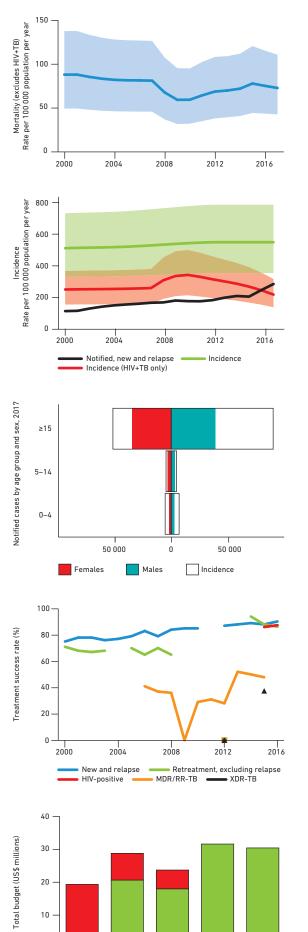
TREATMENT SUCCESS RATE AND CONURT SIZE		
	SUCCESS	COHORT
New and relapse cases registered in 2016	90%	70 510
Previously treated cases, excluding relapse, registered in 2016	86%	1 593
HIV-positive TB cases registered in 2016	87%	30 572
MDR/RR-TB cases started on second-line treatment in 2015	48%	646
XDR-TB cases started on second-line treatment in 2015	38%	16

TB PREVENTIVE TREATMENT, 2017
% of HIV-positive people (newly enrolled in care) on preventive treatment
% of children (aged < 5) household contacts of bacteriologically-confirmed TB cases on preventive treatment ^e

TB FINANCING, 2018	
National TB budget (US\$ millions)	30
Funding source:	5% domestic, 95% international, 0% unfunded

Data are as reported to WHO. Estimates of TB and MDR/RR-TB burden are produced by WHO in consultation with countries. Estimates are rounded and totals are computed prior to rounding.
^a Ranges represent uncertainty intervals. Estimates of TB incidence and mortality for

- Mozambique will be reviewed after final results from their national TB prevalence survey are available in 2019. MDR is TB resistant to rifampicin and isoniazid; RR is TB resistant to rifampicin.
- b
- Includes cases with unknown previous TB treatment history. Includes patients diagnosed before 2017 and patients who were not laboratory-confirmed. Reasons for higher than expected coverage might be that the numerator did not exclude non-household contacts or children of five years and older.



Data for all countries and years can be downloaded from www.who.int/tb/data

Funded domestically

2014

2015

2016

Funded internationally

2017

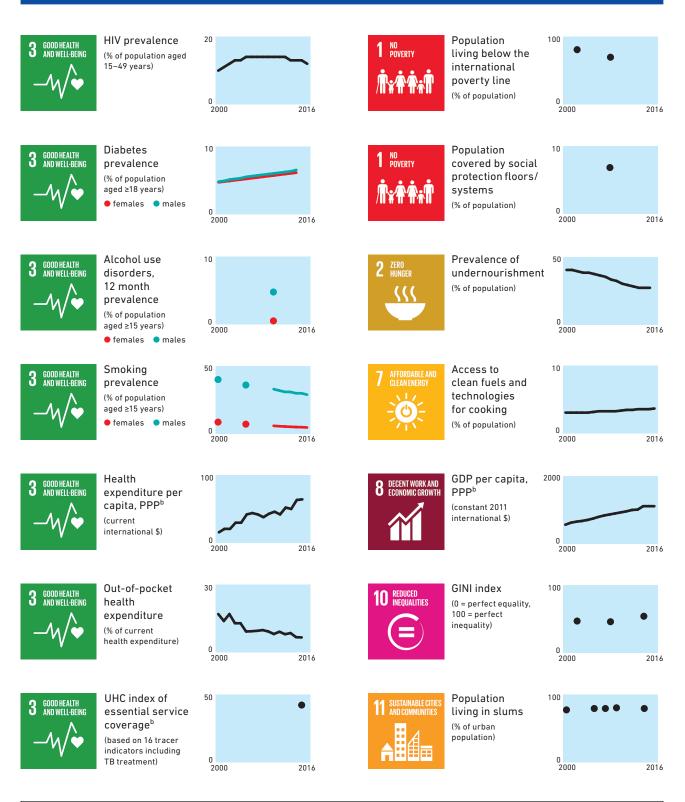
2018

Unfunded

0

> 100%

POPULATION 2017 30 MILLION



Targets for reductions in TB incidence and TB deaths set in WHO's End TB Strategy and the United Nations' Sustainable Development Goals (SDGs) are ambitious. Achieving them requires progress in reducing health-related risk factors for TB infection and disease, as well as broader social and economic determinants of TB infection and disease. WHO has developed a TB-SDG monitoring framework that comprises 14 indicators under seven SDGs for which there is evidence of an association with TB incidence. Further details are provided in **Chapter 2**.

^a Data sources: SDG indicators database, The World Bank, World Health Organization. Missing values and empty boxes indicate data not available in these data sources.

Myanmar

ESTIMATES OF TB BURDEN, ^a 2017		
	NUMBER (THOUSANDS)	RATE (PER 100 000 POPULATION)
Mortality (excludes HIV+TB)	27 (18–39)	51 (33–73)
Mortality (HIV+TB only)	4.9 (3.5-6.6)	9.2 (6.6–12)
Incidence (includes HIV+TB)	191 (141–249)	358 (263–466)
Incidence (HIV+TB only)	17 (12–22)	31 (23–41)
Incidence (MDR/RR-TB) ^b	14 (8–21)	26 (15–39)

ESTIMATED TB INCIDENCE BY AGE AND SEX (THOUSANDS), ^a 2017			
	0–14 YEARS	> 14 YEARS	TOTAL
Females	11 (10–12)	57 (48–66)	68 (57–80)
Males	12 (11–13)	110 (87–134)	123 (95–150)
Total	23 (21–26)	168 (123–212)	191 (141–249)

Total cases notified	132 025
Total new and relapse	130 418
— % tested with rapid diagnostics at time of diagnosis	
— % with known HIV status	90%
— % pulmonary	90%
— % bacteriologically confirmed among pulmonary	41%

TB treatment coverage (notified/estimated incidence), 2017	68% (52–93)
TB patients facing catastrophic total costs, 2015	60% (57–63)
TB case fatality ratio (estimated mortality/estimated incidence), 2017	0.17 (0.11–0.25)

TB/HIV CARE IN NEW AND RELAPSE TB PATIENTS, 2017		
	NUMBER	(%)
Patients with known HIV-status who are HIV-positive	10 164	9%
— on antiretroviral therapy	6 371	63%

DRUG-RESISTANT TB CARE, 2017			
	NEW CASES	PREVIOUSLY TREATED CASES	TOTAL NUMBER ^c
Estimated MDR/RR-TB cases among notified pulmonary TB cas	es		8 700 (6 200–11 000)
Estimated % of TB cases with MDR/RR-TB	5.1% (3.4–7.2)	27% (16–40)	
% notified tested for rifampicin resistance	29%	63%	43 548
MDR/RR-TB cases tested for resis	stance to secon	d-line drugs	165
Laboratory-confirmed cases		MDR/RR-TB: 3 2	81, XDR-TB: 28
Patients started on treatment ^d		MDR/RR-TB: 2	666, XDR-TB: 9

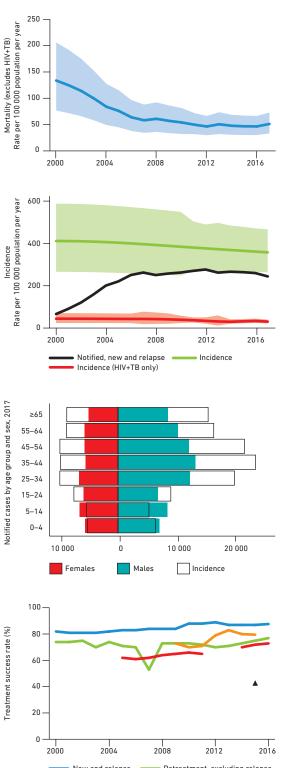
TREATMENT SUCCESS RATE AND COHORT SIZE

	SUCCESS	COHORT
New and relapse cases registered in 2016	88%	136 221
Previously treated cases, excluding relapse, registered in 2016	77%	2 051
HIV-positive TB cases registered in 2016	73%	10 489
MDR/RR-TB cases started on second-line treatment in 2015	80%	2 180
XDR-TB cases started on second-line treatment in 2015	43%	7

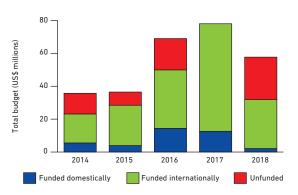
TB PREVENTIVE TREATMENT, 2017 % of HIV-positive people (newly enrolled in care) on preventive treatment % of children (aged < 5) household contacts of

2.1% (1.9-2.3) bacteriologically-confirmed TB cases on preventive treatment

TB FINANCING, 2018	
National TB budget (US\$ millions)	58
Funding source:	4% domestic, 52% international, 45% unfunded







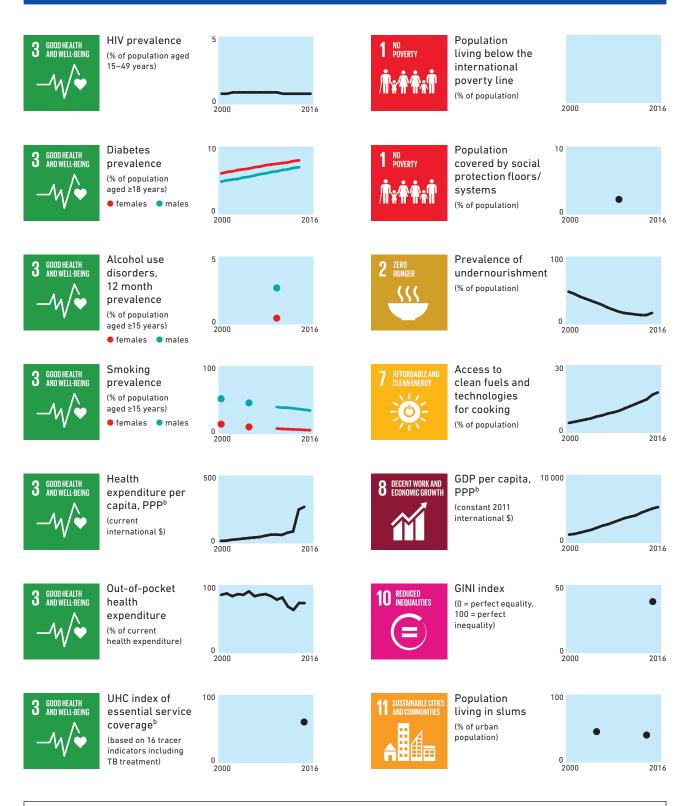
Data are as reported to WHO. Estimates of TB and MDR/RR-TB burden are produced by WHO in consultation with countries. Estimates are rounded and totals are computed prior to rounding. ^a Ranges represent uncertainty intervals. Estimates of TB incidence and mortality for Myanmar will be reviewed after final results from their national TB prevalence survey are available in

- 2019.

^{2017.}
^b MDR is TB resistant to rifampicin and isoniazid; RR is TB resistant to rifampicin.
^c Includes cases with unknown previous TB treatment history.
^d Includes patients diagnosed before 2017 and patients who were not laboratory-confirmed.

POPULATION 2017 53 MILLION

17%



Targets for reductions in TB incidence and TB deaths set in WHO's End TB Strategy and the United Nations' Sustainable Development Goals (SDGs) are ambitious. Achieving them requires progress in reducing health-related risk factors for TB infection and disease, as well as broader social and economic determinants of TB infection and disease. WHO has developed a TB-SDG monitoring framework that comprises 14 indicators under seven SDGs for which there is evidence of an association with TB incidence. Further details are provided in **Chapter 2**.

^a Data sources: SDG indicators database, The World Bank, World Health Organization. Missing values and empty boxes indicate data not available in these data sources.

Nigeria

NUMBER (THOUSANDS)	RATE (PER 100 000 POPULATION)
120 (70–183)	63 (36–96)
35 (21–52)	18 (11–27)
418 (273–594)	219 (143–311)
58 (37–85)	30 (19–44)
24 (14–36)	12 (7.3–19)
	120 (70–183) 35 (21–52) 418 (273–594) 58 (37–85)

ESTIMATED TB INCIDENCE BY AGE AND SEX (THOUSANDS),^a 2017 0–14 YEARS > 14 YEARS TOTAL Females 27 (24-30) 123 (97–148) 150 (115–184) Males 30 (27-33) 238 (169-307) 268 (186-351) Total 57 (49-65) 361 (232-490) 418 (273-594)

104 904
102 387
41%
95%
96%
78%

UNIVERSAL HEALTH COVERAGE AND SOCIAL PROTECTION	
TB treatment coverage (notified/estimated incidence), 2017	24% (17–38)
TB patients facing catastrophic total costs, 2017	71% (68–73)
TB case fatality ratio (estimated mortality/estimated incidence), 2017	0.38 (0.2–0.59)

TB/HIV CARE IN NEW AND RELAPSE TB PATIENTS, 2017		
	NUMBER	(%)
Patients with known HIV-status who are HIV-positive	13 516	14%
— on antiretroviral therapy	11 438	85%

NEW CASES	PREVIOUSLY TREATED CASES	TOTAL NUMBER
ses		5 400 (4 200–6 500)
4.3% (3.2-5.5)	25% (19–31)	
41%	61%	43 829
stance to secon	d-line drugs	691
	MDR/RR-TB: 2 2	86, XDR-TB: 14
	MDR/RR-TB: 1 7	86, XDR-TB: 10
	ses 4.3% (3.2–5.5) 41%	ses 4.3% (3.2–5.5) 25% (19–31)

TREATMENT SUCCESS RATE AND COHORT SIZE

	SUCCESS	COHORT
New and relapse cases registered in 2016	86%	97 240
Previously treated cases, excluding relapse, registered in 2016	83%	3 193
HIV-positive TB cases registered in 2016	77%	14 794
MDR/RR-TB cases started on second-line treatment in 2015	78%	656
XDR-TB cases started on second-line treatment in 2015		0

TB PREVENTIVE TREATMENT, 2017 % of HIV-positive people (newly enrolled in care) on preventive treatment

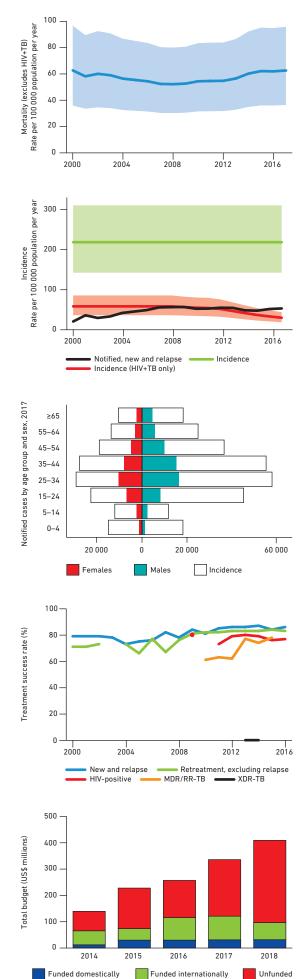
% of HIV-positive people (newly enrolled in care) on preventive treatment	
% of children (aged < 5) household contacts of bacteriologically-confirmed TB cases on preventive treatment	20% (18–21)

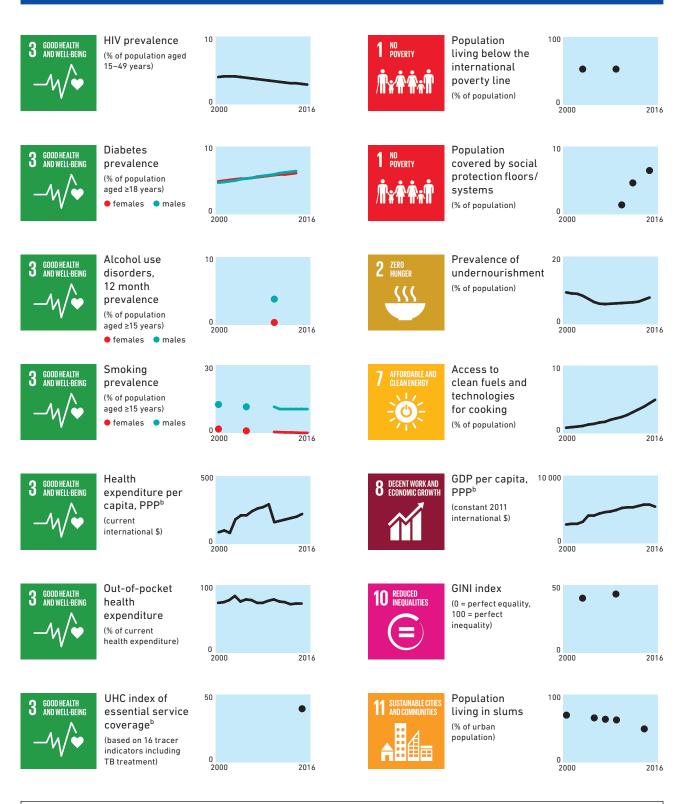
TB FINANCING, 2018	
National TB budget (US\$ millions)	409
Funding source:	8% domestic, 16% international, 76% unfunded



⁶ MDR is TB resistant to rifampicin and isoniazid; RR is TB resistant to rifampicin.
⁶ Includes cases with unknown previous TB treatment history.
^d Includes patients diagnosed before 2017 and patients who were not laboratory-confirmed.

POPULATION 2017 191 MILLION





Targets for reductions in TB incidence and TB deaths set in WHO's End TB Strategy and the United Nations' Sustainable Development Goals (SDGs) are ambitious. Achieving them requires progress in reducing health-related risk factors for TB infection and disease, as well as broader social and economic determinants of TB infection and disease. WHO has developed a TB-SDG monitoring framework that comprises 14 indicators under seven SDGs for which there is evidence of an association with TB incidence. Further details are provided in **Chapter 2**.

^a Data sources: SDG indicators database, The World Bank, World Health Organization. Missing values and empty boxes indicate data not available in these data sources.

Pakistan

ESTIMATES OF TB BURDEN, ^a 2017		
	NUMBER (THOUSANDS)	RATE (PER 100 000 POPULATION)
Mortality (excludes HIV+TB)	54 (42–67)	27 (21–34)
Mortality (HIV+TB only)	2.2 (1.1–3.8)	1.1 (0.56–1.9)
Incidence (includes HIV+TB)	525 (373–704)	267 (189–357)
Incidence (HIV+TB only)	7.3 (3.6–12)	3.7 (1.8-6.2)
Incidence (MDR/RR-TB) ^b	27 (17–39)	14 (8.8–20)

ESTIMATED TB INCIDENCE BY AGE AND SEX (THOUSANDS),^a 2017 0–14 YEARS > 14 YEARS TOTAL Females 27 (25–29) 207 (166-248) 235 (185-284) 261 (203-319) 291 (223-359) Males 30 (28-32) 57 (51-63) 468 (329-607) 525 (373-704) Total

TB CASE NOTIFICATIONS, 2017	
Total cases notified	368 897
Total new and relapse	359 224
— % tested with rapid diagnostics at time of diagnosis	3%
— % with known HIV status	7%
— % pulmonary	80%
— % bacteriologically confirmed among pulmonary	48%
UNIVERSAL HEALTH COVERAGE AND SOCIAL PROTECTION	
TB treatment coverage (notified/estimated incidence), 2017	68% (51–96)
TB patients facing catastrophic total costs	

TB case fatality ratio (estimated mortality/estimated 0.11(0.07 - 0.15)incidence), 2017

TB/HIV CARE IN NEW AND RELAPSE TB PATIENTS, 2017		
NUMBER	(%)	
121	<1%	
97	80%	
	121	

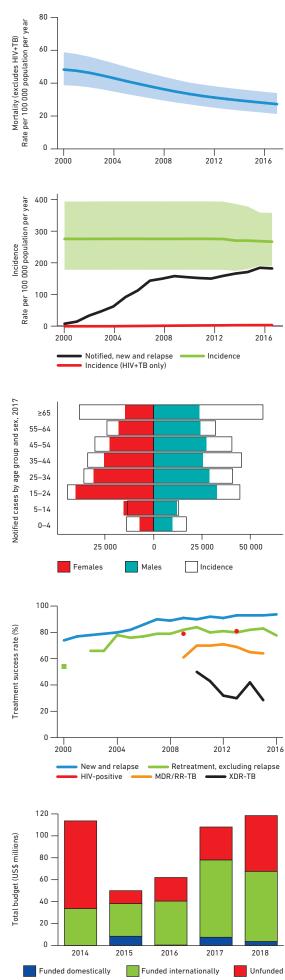
DRUG-RESISTANT TB CARE, 2017			
	NEW CASES	PREVIOUSLY TREATED CASES	TOTAL NUMBER ^C
Estimated MDR/RR-TB cases among notified pulmonary TB ca	ses	(1)	15 000 2 000–18 000)
Estimated % of TB cases with MDR/RR-TB	4.2% (3.2–5.3)	16% (15–17)	
% notified tested for rifampicin resistance	11%	47%	54 991
MDR/RR-TB cases tested for res	istance to secon	d-line drugs	2 887
Laboratory-confirmed cases		MDR/RR-TB: 3 475	i, XDR-TB: 128
Patients started on treatment ^d		MDR/RR-TB: 3 01	6, XDR-TB: 65

TREATMENT SUCCESS RATE AND COHORT SIZE		
Success	Cohort	
New and relapse cases registered in 2016	94%	356 390
Previously treated cases, excluding relapse, registered in 2016	78%	9 671
HIV-positive TB cases registered in 2016		
MDR/RR-TB cases started on second-line treatment in 2015	64%	2 544
XDR-TB cases started on second-line treatment in 2015	29%	77

TB PREVENTIVE TREATMENT, 2017

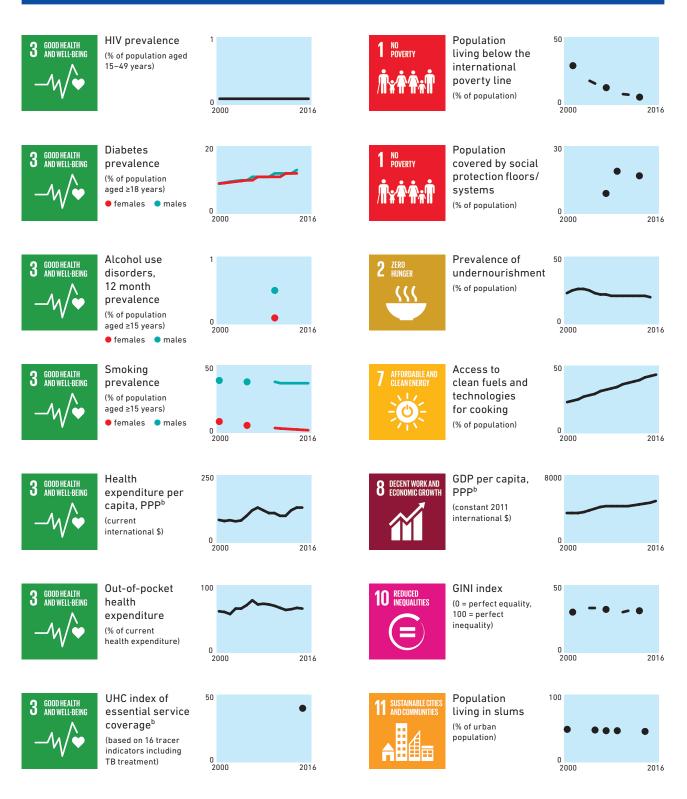
% of HIV-positive people (newly enrolled in care) on preventive treatment % of children (aged < 5) household contacts of bacteriologically-confirmed TB cases on preventive treatment

TB FINANCING, 2018 National TB budget (US\$ millions) 118 Funding source: 3% domestic, 54% international, 43% unfunded POPULATION 2017 197 MILLION



Data are as reported to WHO. Estimates of TB and MDR/RR-TB burden are produced by WHO in consultation with countries. Estimates are rounded and totals are computed prior to rounding.
^a Ranges represent uncertainty intervals.

⁶ MDR is TB resistant to rifampicin and isoniazid; RR is TB resistant to rifampicin.
⁶ Includes cases with unknown previous TB treatment history.
^d Includes patients diagnosed before 2017 and patients who were not laboratory-confirmed.



Targets for reductions in TB incidence and TB deaths set in WHO's End TB Strategy and the United Nations' Sustainable Development Goals (SDGs) are ambitious. Achieving them requires progress in reducing health-related risk factors for TB infection and disease, as well as broader social and economic determinants of TB infection and disease. WHO has developed a TB-SDG monitoring framework that comprises 14 indicators under seven SDGs for which there is evidence of an association with TB incidence. Further details are provided in **Chapter 2**.

^a Data sources: SDG indicators database, The World Bank, World Health Organization. Missing values and empty boxes indicate data not available in these data sources.

Philippines

NUMBER (THOUSANDS)	RATE (PER 100 000 POPULATION)
26 (23–31)	25 (22–29)
0.38 (0-3.3)	0.36 (0-3.1)
581 (326-909)	554 (311-866)
7.1 (2.9–13)	6.7 (2.8–12)
27 (12–47)	26 (12-45)
	26 (23–31) 0.38 (0–3.3) 581 (326–909) 7.1 (2.9–13)

ESTIMATED TB INCIDENCE BY AGE AND SEX (THOUSANDS),^a 2017 0–14 YEARS > 14 YEARS TOTAL Females 34 (30-38) 139 (105–173) 173 (126–220) 37 (33-42) 371 (223-519) 408 (237-580) Males Total 71 (59-84) 510 (271-749) 581 (326-909)

TB CASE NOTIFICATIONS, 2017	
Total cases notified	328 773
Total new and relapse	317 266
— % tested with rapid diagnostics at time of diagnosis	26%
— % with known HIV status	24%
— % pulmonary	98%
— % bacteriologically confirmed among pulmonary	39%
UNIVERSAL HEALTH COVERAGE AND SOCIAL PROTECTION	

UNITERSAL ILLALIN COTERADE AND SOCIAL I ROTECTION	
TB treatment coverage (notified/estimated incidence), 2017	55% (35–97)
TB patients facing catastrophic total costs, 2017	35%
TB case fatality ratio (estimated mortality/estimated incidence), 2017	0.05 (0.03-0.08)

TB/HIV CARE IN NEW AND RELAPSE TB PATIENTS, 2017		
	NUMBER	(%)
Patients with known HIV-status who are HIV-positive	1 335	2%
— on antiretroviral therapy	1 185	89%

DRUG-RESISTANT TB CARE, 2017			
	NEW CASES	PREVIOUSLY TREATED CASES	TOTAL NUMBER ^C
Estimated MDR/RR-TB cases among notified pulmonary TB cas	ses	(1	20 000 8 000–22 000)
Estimated % of TB cases with MDR/RR-TB	2.6% (1.9–3.4)	28% (27–28)	
% notified tested for rifampicin resistance	19%	83%	93 058
MDR/RR-TB cases tested for resi	istance to secon	d-line drugs	2 401
Laboratory-confirmed cases		MDR/RR-TB: 6 43	38, XDR-TB: 15
Patients started on treatment ^d		MDR/RR-TB: 5 6	23, XDR-TB: 16

TREATMENT SUCCESS RATE AND COHORT SIZE

TREATMENT BOOGEDD NATE AND CONORT DIEE		
	SUCCESS	COHORT
New and relapse cases registered in 2016	91%	332 308
Previously treated cases, excluding relapse, registered in 2016	80%	10 097
HIV-positive TB cases registered in 2016	82%	989
MDR/RR-TB cases started on second-line treatment in 2015	54%	3 851
XDR-TB cases started on second-line treatment in 2015	33%	9

TB PREVENTIVE TREATMENT, 2017 % of HIV-positive people (newly enrolled in care) on preventive treatment

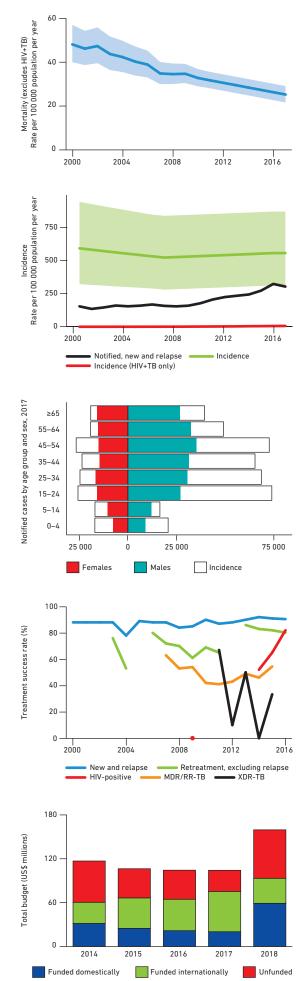
% of children (aged < 5) household contacts of bacteriologically-confirmed TB cases on preventive treatment

160
37% domestic, 21% international, 42% unfunded

Data are as reported to WHO. Estimates of TB and MDR/RR-TB burden are produced by WHO in consultation with countries. Estimates are rounded and totals are computed prior to rounding. ^a Ranges represent uncertainty intervals.

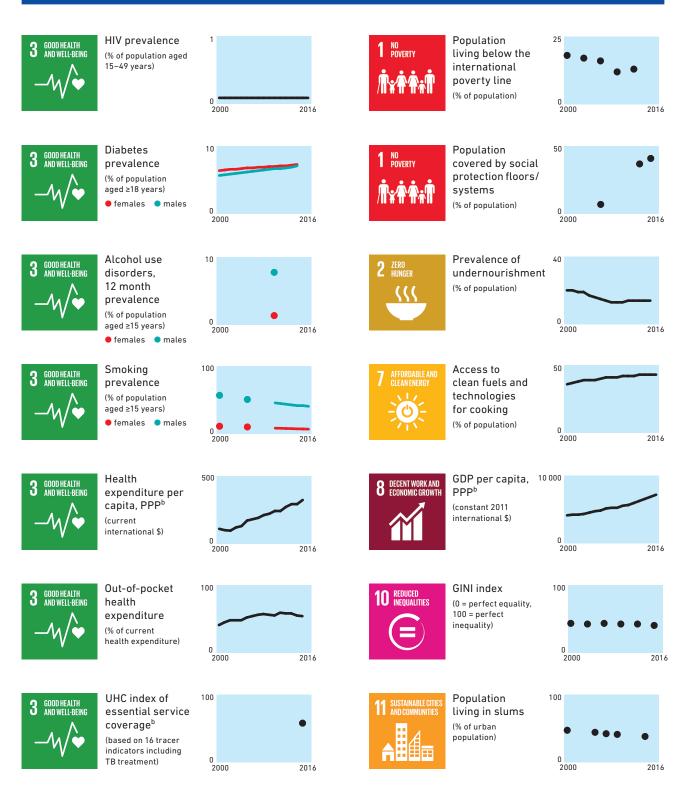
⁶ MDR is TB resistant to rifampicin and isoniazid; RR is TB resistant to rifampicin.
⁶ Includes cases with unknown previous TB treatment history.
^d Includes patients diagnosed before 2017 and patients who were not laboratory-confirmed.

POPULATION 2017 105 MILLION



57%

12% (11–13)



Targets for reductions in TB incidence and TB deaths set in WHO's End TB Strategy and the United Nations' Sustainable Development Goals (SDGs) are ambitious. Achieving them requires progress in reducing health-related risk factors for TB infection and disease, as well as broader social and economic determinants of TB infection and disease. WHO has developed a TB-SDG monitoring framework that comprises 14 indicators under seven SDGs for which there is evidence of an association with TB incidence. Further details are provided in **Chapter 2**.

^a Data sources: SDG indicators database, The World Bank, World Health Organization. Missing values and empty boxes indicate data not available in these data sources.

Russian Federation

ESTIMATES OF TB BURDEN, ^b 2017		
	NUMBER (THOUSANDS)	RATE (PER 100 000 POPULATION)
Mortality (excludes HIV+TB)	10 (9.4–12)	7.3 (6.6–8)
Mortality (HIV+TB only)	1.7 (0.85–2.8)	1.2 (0.59–1.9)
Incidence (includes HIV+TB)	86 (56–123)	60 (39–85)
Incidence (HIV+TB only)	18 (12–26)	13 (8.3–18)
Incidence (MDR/RR-TB) ^c	56 (36-82)	39 (25–57)

ESTIMATED TB INCIDENCE BY AGE AND SEX (THOUSANDS), ^b 2017			
	0–14 YEARS	> 14 YEARS	TOTAL
Females	1.4 (1.3–1.4)	25 (20-30)	26 (21–32)
Males	1.2 (1.1–1.3)	59 (40-78)	60 (40-79)
Total	2.6 (2.4–2.7)	84 (51–116)	86 (56–123)

TB CASE NOTIFICATIONS, 2017	
Total cases notified	114 187
Total new and relapse	84 510
— % tested with rapid diagnostics at time of diagnosis	78%
— % with known HIV status	96%
— % pulmonary	92%
— % bacteriologically confirmed among pulmonary	52%
UNIVERSAL HEALTH COVERAGE AND SOCIAL PROTECTION	
TB treatment coverage (notified/estimated incidence), 2017	98% (69–150)
TB patients facing catastrophic total costs	
TB case fatality ratio (estimated mortality/estimated incidence), 2017	0.15 (0.09–0.21)

TB/HIV CARE IN NEW AND RELAPSE TB PATIENTS, 2017		
	NUMBER	(%)
Patients with known HIV-status who are HIV-positive	15 695	19%
— on antiretroviral therapy	9 748	62%

DRUG-RESISTANT TB CARE, 2017			
	NEW CASES	PREVIOUSLY TREATED CASES	TOTAL NUMBER ^d
Estimated MDR/RR-TB cases among notified pulmonary TB cas	ses	(4	49 000 9 000–50 000)
Estimated % of TB cases with MDR/RR-TB	32% (31–33)	67% (66–67)	
% notified tested for rifampicin resistance	42%	58%	55 344
MDR/RR-TB cases tested for resi	stance to secon	id-line drugs	23 098
Laboratory-confirmed cases		MDR/RR-TB: 26 602,	XDR-TB: 3 661
Patients started on treatment ^e		MDR/RR-TB: 26 457,	XDR-TB: 2 770

TREATMENT SUCCESS RATE AND COHORT SIZE

	SUCCESS	COHORT
New and relapse cases registered in 2016	72%	73 137
Previously treated cases, excluding relapse, registered in 2016	49%	9 245
HIV-positive TB cases registered in 2016	53%	1 328
MDR/RR-TB cases started on second-line treatment in 2015	54%	22 607
XDR-TB cases started on second-line treatment in 2015	33%	2 882

TB PREVENTIVE TREATMENT, 2017	
% of HIV-positive people (newly enrolled in care) on preventive treatment	97%
% of children (aged < 5) household contacts of bacteriologically-confirmed TB cases on preventive treatment ^f	> 100%

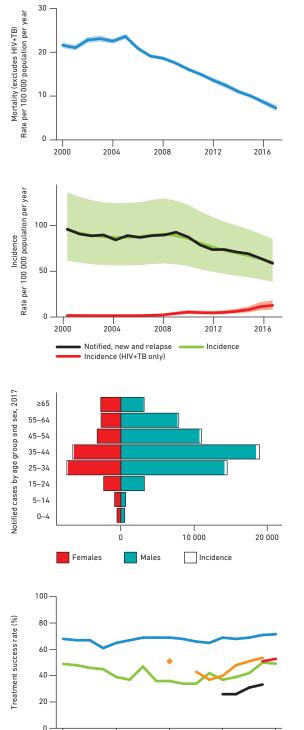
TB FINANCING, 2018	
National TB budget (US\$ millions)	1 435
Funding source:	100% domestic, 0% international, 0% unfunded

Data are as reported to WHO. Estimates of TB and MDR/RR-TB burden are produced by WHO in are as reported to who is similates or rounded and totals are computed prior to rounding.
UN Population Division estimates are lower than the population registered by the Federal State

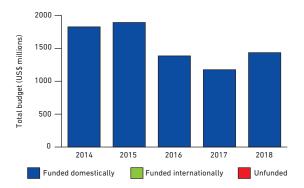
Statistics Service of the Russian Federation.

Ranges represent uncertainty intervals.

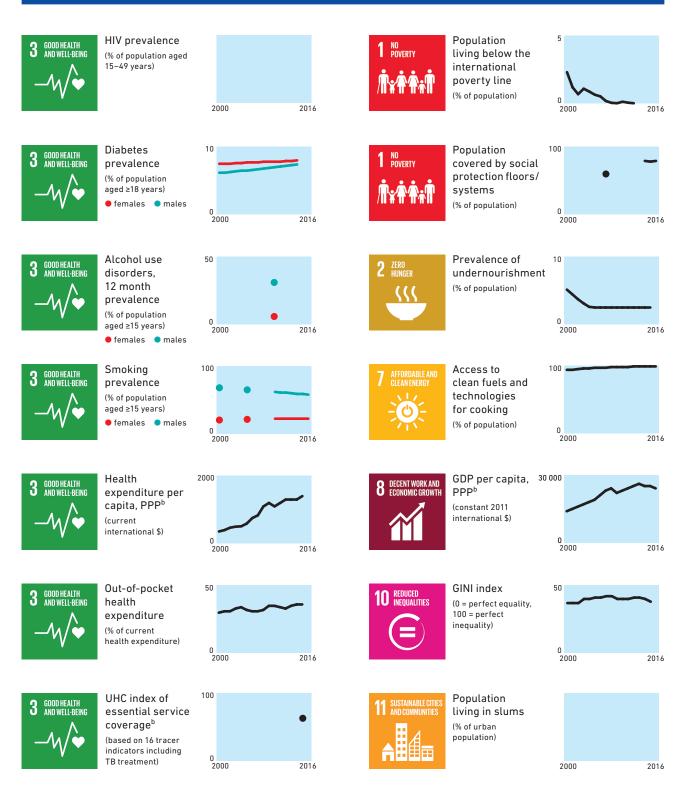
- MDR is TB resistant to rifampicin and isoniazid; RR is TB resistant to rifampicin.
- Includes cases with unknown previous TB treatment history. Includes patients diagnosed before 2017 and patients who were not laboratory-confirmed. Reasons for higher than expected coverage might be that the numerator did not exclude non-household contacts or children of five years and older.







POPULATION 2017^a 144 MILLION



Targets for reductions in TB incidence and TB deaths set in WHO's End TB Strategy and the United Nations' Sustainable Development Goals (SDGs) are ambitious. Achieving them requires progress in reducing health-related risk factors for TB infection and disease, as well as broader social and economic determinants of TB infection and disease. WHO has developed a TB-SDG monitoring framework that comprises 14 indicators under seven SDGs for which there is evidence of an association with TB incidence. Further details are provided in **Chapter 2**.

^a Data sources: SDG indicators database, The World Bank, World Health Organization. Missing values and empty boxes indicate data not available in these data sources.

South Africa

incidence), 2017

ESTIMATES OF TB BURDEN, ^a 2017		
	NUMBER (THOUSANDS)	RATE (PER 100 000 POPULATION)
Mortality (excludes HIV+TB)	22 (20–24)	39 (35–43)
Mortality (HIV+TB only)	56 (39–77)	99 (68–135)
Incidence (includes HIV+TB)	322 (230-428)	567 (406-754)
Incidence (HIV+TB only)	193 (137–258)	340 (241–455)
Incidence (MDR/RR-TB) ^b	14 (8.9–20)	25 (16-36)

ESTIMATED TB INCIDENCE BY AGE AND SEX (THOUSANDS),^a 2017 0–14 YEARS > 14 YEARS TOTAL Females 18 (17-19) 117 (95–138) 135 (108–161) Males 20 (18-21) 167 (130-204) 187 (143-231) Total 38 (34-42) 284 (202-366) 322 (230-428)

TB CASE NOTIFICATIONS, 2017	
Total cases notified	227 224
Total new and relapse	220 163
— % tested with rapid diagnostics at time of diagnosis	66%
— % with known HIV status	94%
— % pulmonary	89%
— % bacteriologically confirmed among pulmonary	65%
UNIVERSAL HEALTH COVERAGE AND SOCIAL PROTECTION	
TB treatment coverage (notified/estimated incidence), 2017	68% (51–96)
TB patients facing catastrophic total costs	
TB case fatality ratio (estimated mortality/estimated incidence). 2017	0.25 (0.16-0.35)

TB/HIV CARE IN NEW AND RELAPSE TB PATIENTS, 2017		
	NUMBER	(%)
Patients with known HIV-status who are HIV-pos	tive 123 148	60%
— on antiretroviral therapy	109 799	89%
DRUG-RESISTANT TB CARE, 2017		
NEW CASES	PREVIOUSLY TREATED CASES	TOTAL NUMBER

Estimated MDR/RR-TB cases among notified pulmonary TB ca	ises		7 700 (6 000-9 400)
Estimated % of TB cases with MDR/RR-TB	3.4% (2.5-4.3)	7.1% (4.8–9.5)	
% notified tested for rifampicin resistance	64%	68%	150 548
MDR/RR-TB cases tested for res	istance to secon	d-line drugs	
Laboratory-confirmed cases		MDR/RR-TB: 15 98	6, XDR-TB: 747
Patients started on treatment ^d		MDR/RR-TB: 10 25	9, XDR-TB: 463

TREATMENT SUCCESS RATE AND COHORT SIZE		
	SUCCESS	COHORT
New and relapse cases registered in 2016	82%	236 702
Previously treated cases, excluding relapse, registered in 2016	62%	5 129
HIV-positive TB cases registered in 2016	80%	133 710
MDR/RR-TB cases started on second-line treatment in 2015	55%	9 750
XDR-TB cases started on second-line treatment in 2015	48%	427

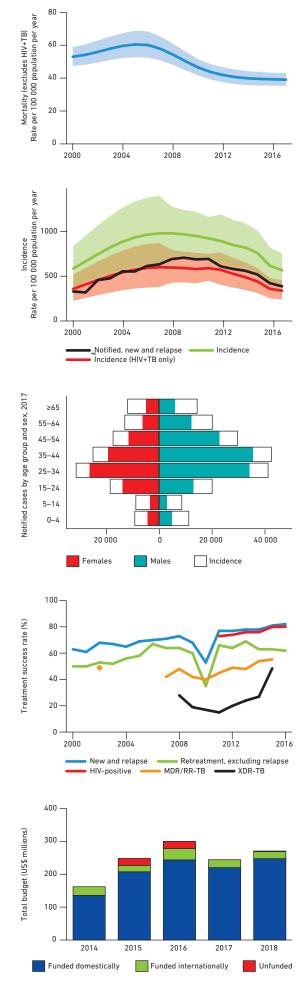
TB PREVENTIVE TREATMENT, 2017		
% of HIV-positive people (newly enrolled in care) on preventive treatm	ent	53%
% of children (aged < 5) household contacts of bacteriologically-confirmed TB cases on preventive treatment	79% (72–86)

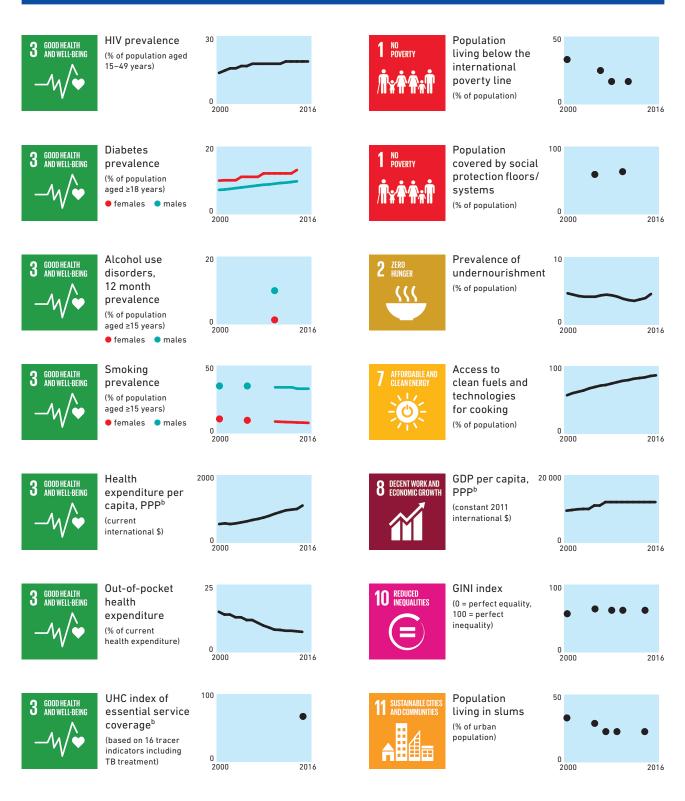
TB FINANCING, 2018	
National TB budget (US\$ millions)	271
Funding source:	91% domestic, 8% international, <1% unfunded

Data are as reported to WHO. Estimates of TB and MDR/RR-TB burden are produced by WHO in consultation with countries. Estimates are rounded and totals are computed prior to rounding. ^a Ranges represent uncertainty intervals. Estimates of TB incidence and mortality for South Africa will be reviewed after final results from their national TB prevalence survey are

- available in 2019. MDR is TB resistant to rifampicin and isoniazid; RR is TB resistant to rifampicin.
- Includes cases with unknown previous TB treatment history. Includes patients diagnosed before 2017 and patients who were not laboratory-confirmed. d

POPULATION 2017 57 MILLION





Targets for reductions in TB incidence and TB deaths set in WHO's End TB Strategy and the United Nations' Sustainable Development Goals (SDGs) are ambitious. Achieving them requires progress in reducing health-related risk factors for TB infection and disease, as well as broader social and economic determinants of TB infection and disease. WHO has developed a TB-SDG monitoring framework that comprises 14 indicators under seven SDGs for which there is evidence of an association with TB incidence. Further details are provided in **Chapter 2**.

^a Data sources: SDG indicators database, The World Bank, World Health Organization. Missing values and empty boxes indicate data not available in these data sources.

Thailand

ESTIMATES OF TB BURDEN, ^a 2017		
	NUMBER (THOUSANDS)	RATE (PER 100 000 POPULATION)
Mortality (excludes HIV+TB)	9.3 (7–12)	13 (10–17)
Mortality (HIV+TB only)	2.9 (2.1–3.8)	4.2 (3.1-5.6)
Incidence (includes HIV+TB)	108 (82–138)	156 (119–199)
Incidence (HIV+TB only)	11 (8.5–15)	16 (12–21)
Incidence (MDR/RR-TB)**	3.9 (2.5-5.7)	5.7 (3.6-8.2)

ESTIMATED TB INCIDENCE BY AGE AND SEX (THOUSANDS), ^a 2017				
	0–14 YEARS	> 14 YEARS	TOTAL	
Females	4.1 (3.9-4.3)	33 (28–37)	37 (31–42)	
Males	4.4 (4.2-4.7)	67 (53–81)	71 (56–86)	
Total	8.5 (7.9–9.1)	100 (75–124)	108 (82–138)	

TB CASE NOTIFICATIONS, 2017	
Total cases notified	82 008
Total new and relapse	80 160
— % tested with rapid diagnostics at time of diagnosis	12%
— % with known HIV status	82%
— % pulmonary	83%
— % bacteriologically confirmed among pulmonary	55%
UNIVERSAL HEALTH COVERAGE AND SOCIAL PROTECTION	
TB treatment coverage (notified/estimated incidence), 2017	74% (58–98)

TB patients facing catastrophic total costs	
TB case fatality ratio (estimated mortality/estimated incidence), 2017	0.11 (0.08–0.16)

	NUMBER	(%)
Patients with known HIV-status who are HIV-positive	7 130	11%
— on antiretroviral therapy	4 577	64%

DRUG-RESISTANT TB CARE, 2017			
	NEW CASES	PREVIOUSLY TREATED CASES	TOTAL NUMBER ^C
Estimated MDR/RR-TB cases among notified pulmonary TB cas	es		2 700 (2 100–3 300)
Estimated % of TB cases with MDR/RR-TB	2.2% (1.5–3)	24% (18–31)	
% notified tested for rifampicin resistance	24%	37%	24 470
MDR/RR-TB cases tested for resis	stance to secon	d-line drugs	272
Laboratory-confirmed cases		MDR/RR-TB: 1	339, XDR-TB: 7
Patients started on treatment ^d		MDR/RR-TB:	851, XDR-TB: 8

TREATMENT SUCCESS RATE AND COHORT SIZE		
	SUCCESS	COHORT
New and relapse cases registered in 2016	83%	68 146
Previously treated cases, excluding relapse, registered in 2016	71%	3 806
HIV-positive TB cases registered in 2016	72%	6 552
MDR/RR-TB cases started on second-line treatment in 2015	60%	352
XDR-TB cases started on second-line treatment in 2015		

TB PREVENTIVE TREATMENT, 2017	
% of HIV-positive people (newly enrolled in care) on preventive tr	eatment
% of children (aged < 5) household contacts of	E0/ (/

5% (4.6-5.5) bacteriologically-confirmed TB cases on preventive treatment

TB FINANCING, 2018	
National TB budget (US\$ millions)	26
Funding source:	87% domestic, 13% international, 0% unfunded

40

30

20

10

400

300

200

100

0 2000

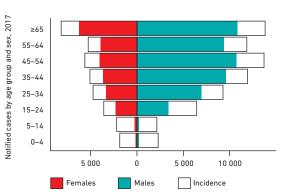
2004

Notified, new and relapse Incidence (HIV+TB only)

Mortality (excludes HIV+TB) per 100 000 population per year

Rate 0

Incidence Rate per 100 000 population per year

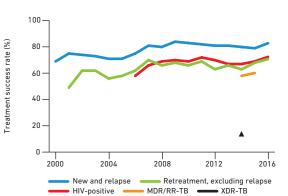


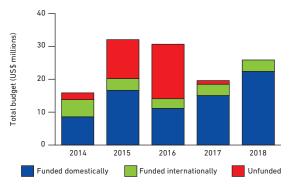
2008

2012

Incidence

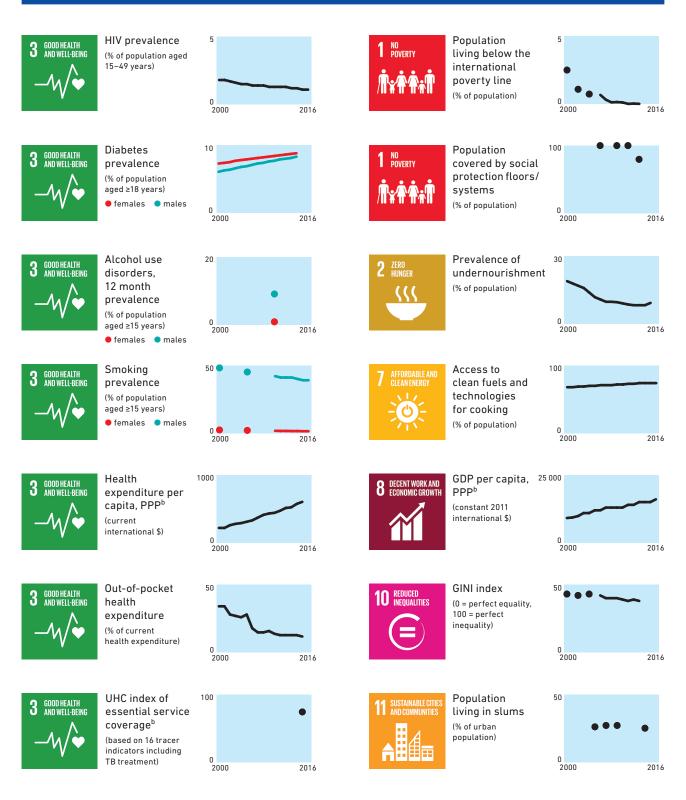
2016





Data are as reported to WHO. Estimates of TB and MDR/RR-TB burden are produced by WHO in consultation with countries. Estimates are rounded and totals are computed prior to rounding.
^a Ranges represent uncertainty intervals.

⁶ MDR is TB resistant to rifampicin and isoniazid; RR is TB resistant to rifampicin.
⁶ Includes cases with unknown previous TB treatment history.
^d Includes patients diagnosed before 2017 and patients who were not laboratory-confirmed.



Targets for reductions in TB incidence and TB deaths set in WHO's End TB Strategy and the United Nations' Sustainable Development Goals (SDGs) are ambitious. Achieving them requires progress in reducing health-related risk factors for TB infection and disease, as well as broader social and economic determinants of TB infection and disease. WHO has developed a TB-SDG monitoring framework that comprises 14 indicators under seven SDGs for which there is evidence of an association with TB incidence. Further details are provided in **Chapter 2**.

^a Data sources: SDG indicators database, The World Bank, World Health Organization. Missing values and empty boxes indicate data not available in these data sources.

United Republic of Tanzania

ESTIMATES OF TB BURDEN, ^a 2017		
	NUMBER (THOUSANDS)	RATE (PER 100 000 POPULATION)
Mortality (excludes HIV+TB)	27 (12–48)	47 (21-83)
Mortality (HIV+TB only)	22 (10–38)	39 (18–67)
Incidence (includes HIV+TB)	154 (73–266)	269 (127-464)
Incidence (HIV+TB only)	48 (31–69)	84 (54–120)
Incidence (MDR/RR-TB)**	1.7 (0.52–3.5)	2.9 (0.91-6)

ESTIMATED TB INCIDENCE BY AGE AND SEX (THOUSANDS), ^a 2017			
	0–14 YEARS	> 14 YEARS	TOTAL
Females	4.1 (3.7-4.5)	46 (30-62)	50 (32–68)
Males	4.6 (4.1-5)	100 (50–150)	104 (51–158)
Total	8.7 (7.4–9.9)	146 (57–234)	154 (73–266)

TB CASE NOTIFICATIONS, 2017	
Total cases notified	69 818
Total new and relapse	68 473
— % tested with rapid diagnostics at time of diagnosis	14%
— % with known HIV status	98%
— % pulmonary	80%
— % bacteriologically confirmed among pulmonary	52%
UNIVERSAL HEALTH COVERAGE AND SOCIAL PROTECTION	
TB treatment coverage (notified/estimated incidence), 2017	44% (26-94)
TB patients facing catastrophic total costs	
TB case fatality ratio (estimated mortality/estimated incidence), 2017	0.35 (0.13–0.62)

TB/HIV CARE IN NEW AND RELAPSE TB PATIE	NTS, 2017			
			NUMBER	(%)
Patients with known HIV-status who ar	e HIV-po	sitive	21 449	31%
— on antiretroviral therapy			20 314	95%
DRUG-RESISTANT TB CARE, 2017				
N	EW CASES	PREVIOU	SLY TREATED CASES	TOTAL NUMBER

	NEW CASES	PREVIOUSLY TREATED CASES	TOTAL NUMBER ^C
Estimated MDR/RR-TB cases among notified pulmonary TB ca	ses		640 (290–980)
Estimated % of TB cases with MDR/RR-TB	0.9% (0.3–1.5)	4.7% (0.7-8.6)	
% notified tested for rifampicin resistance	14%	56%	11 769
MDR/RR-TB cases tested for res	istance to secon	d-line drugs	44
Laboratory-confirmed cases		MDR/RR-TB: 2	00, XDR-TB: 0
Patients started on treatment ^d		MDR/RR-TB: 1	67, XDR-TB: 0

TREATMENT SUCCESS RATE AND COHORT SIZE

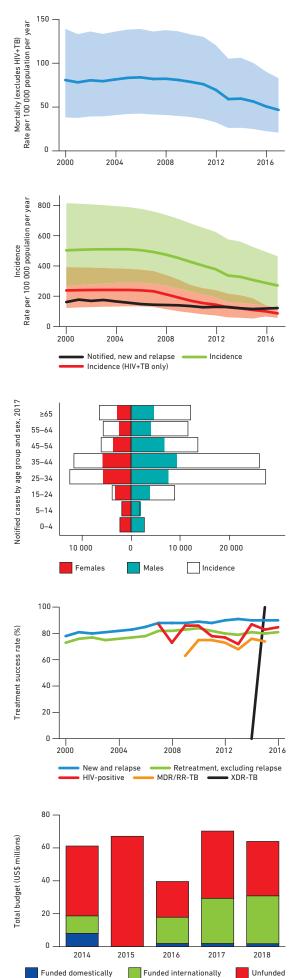
	SUCCESS	COHORT
New and relapse cases registered in 2016	90%	64 609
Previously treated cases, excluding relapse, registered in 2016	81%	1 334
HIV-positive TB cases registered in 2016	85%	22 642
MDR/RR-TB cases started on second-line treatment in 2015	74%	119
XDR-TB cases started on second-line treatment in 2015	100%	1

TB PREVENTIVE TREATMENT, 2017

% of HIV-positive people (newly enrolled in care) on preventive treatment % of children (aged < 5) household contacts of 35% (32-38) bacteriologically-confirmed TB cases on preventive treatment

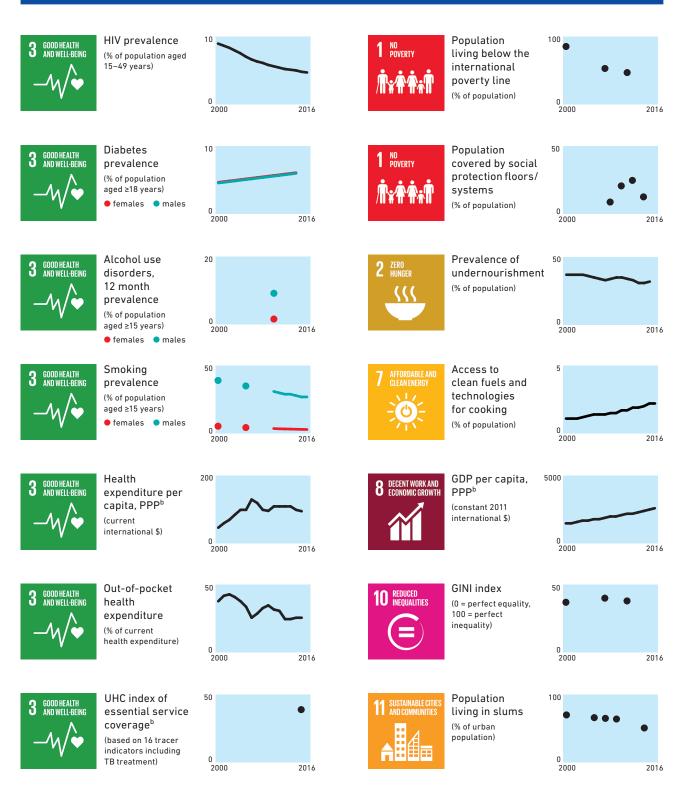
TB FINANCING, 2018	
National TB budget (US\$ millions)	64
Funding source:	3% domestic, 46% international, 52% unfunded

POPULATION 2017 57 MILLION



Data are as reported to WHO. Estimates of TB and MDR/RR-TB burden are produced by WHO in consultation with countries. Estimates are rounded and totals are computed prior to rounding.
^a Ranges represent uncertainty intervals.

⁶ MDR is TB resistant to rifampicin and isoniazid; RR is TB resistant to rifampicin.
⁶ Includes cases with unknown previous TB treatment history.
^d Includes patients diagnosed before 2017 and patients who were not laboratory-confirmed.



Targets for reductions in TB incidence and TB deaths set in WHO's End TB Strategy and the United Nations' Sustainable Development Goals (SDGs) are ambitious. Achieving them requires progress in reducing health-related risk factors for TB infection and disease, as well as broader social and economic determinants of TB infection and disease. WHO has developed a TB-SDG monitoring framework that comprises 14 indicators under seven SDGs for which there is evidence of an association with TB incidence. Further details are provided in **Chapter 2**.

^a Data sources: SDG indicators database, The World Bank, World Health Organization. Missing values and empty boxes indicate data not available in these data sources.

Viet Nam

NUMBER (THOUSANDS)	RATE (PER 100 000 POPULATION)
12 (7.5–17)	12 (7.8–17)
0.84 (0.61–1.1)	0.88 (0.64-1.2)
124 (101–148)	129 (106–155)
4.5 (3.7–5.4)	4.7 (3.8-5.7)
7.1 (4.6–10)	7.4 (4.8–11)
	12 (7.5–17) 0.84 (0.61–1.1) 124 (101–148) 4.5 (3.7–5.4)

ESTIMATED TB INCIDENCE BY AGE AND SEX (THOUSANDS),^a 2017 0–14 YEARS > 14 YEARS TOTAL Females 6.6 (6.3-6.9) 30 (27–33) 37 (33-40) 8.5 (8.1-8.9) 79 (67-90) 87 (73-101) Males 15 (14–16) 109 (89-128) 124 (101–148) Total

TB CASE NOTIFICATIONS, 2017	
Total cases notified	105 733
Total new and relapse	102 725
— % tested with rapid diagnostics at time of diagnosis	26%
— % with known HIV status	85%
— % pulmonary	80%
— % bacteriologically confirmed among pulmonary	70%

UNIVERSAL REALTH COVERAGE AND SOCIAL PROTECTION	
TB treatment coverage (notified/estimated incidence), 2017	83% (69–100)
TB patients facing catastrophic total costs, 2016	63% (58–67)
TB case fatality ratio (estimated mortality/estimated incidence), 2017	0.1 (0.06–0.15)

TB/HIV CARE IN NEW AND RELAPSE TB PATIENTS, 20	17		
		NUMBER	(%)
Patients with known HIV-status who are HIV-	positive	3 239	4%
— on antiretroviral therapy		3 054	94%
DRUG-RESISTANT TB CARE, 2017			
NEW CASES	PREVIOU	SLY TREATED CASES	TOTAL NUMBER

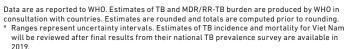
Estimated MDR/RR-TB cases among notified pulmonary TB ca	ases		4 900 (3 800–6 000)
Estimated % of TB cases with MDR/RR-TB	4.1% (2.7–5.7)	17% (17–18)	
% notified tested for rifampicin resistance	32%	67%	41 595
MDR/RR-TB cases tested for res	sistance to second-	-line drugs	1 484
Laboratory-confirmed cases		MDR/RR-TB: 3	071, XDR-TB: 50
Patients started on treatment ^d		MDR/RR-TB: 2	694, XDR-TB: 12

TREATMENT SUCCESS RATE AND COHORT SIZE

	SUCCESS	COHORT
New and relapse cases registered in 2016	92%	99 869
Previously treated cases, excluding relapse, registered in 2016	86%	4 4 3 0
HIV-positive TB cases registered in 2016	49%	2 669
MDR/RR-TB cases started on second-line treatment in 2015	74%	2 0 4 5
XDR-TB cases started on second-line treatment in 2015		

TB PREVENTIVE TREATMENT, 2017 % of HIV-positive people (newly enrolled in care) on preventive treatment 31% % of children (aged < 5) household contacts of 26% (24-29) bacteriologically-confirmed TB cases on preventive treatment

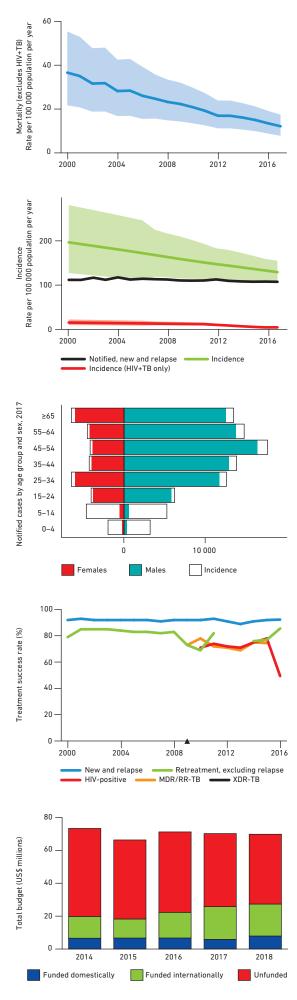
TB FINANCING, 2018	
National TB budget (US\$ millions)	70
Funding source:	11% domestic, 28% international, 61% unfunded

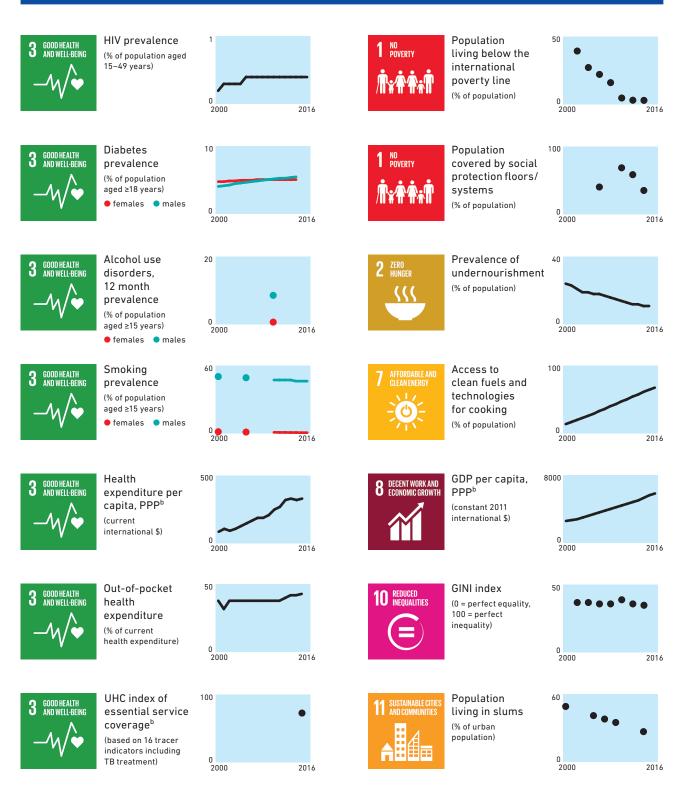


MDR is TB resistant to rifampicin and isoniazid; RR is TB resistant to rifampicin.

Includes cases with unknown previous TB treatment history. Includes patients diagnosed before 2017 and patients who were not laboratory-confirmed. d

POPULATION 2017 96 MILLION





Targets for reductions in TB incidence and TB deaths set in WHO's End TB Strategy and the United Nations' Sustainable Development Goals (SDGs) are ambitious. Achieving them requires progress in reducing health-related risk factors for TB infection and disease, as well as broader social and economic determinants of TB infection and disease. WHO has developed a TB-SDG monitoring framework that comprises 14 indicators under seven SDGs for which there is evidence of an association with TB incidence. Further details are provided in **Chapter 2**.

^a Data sources: SDG indicators database, The World Bank, World Health Organization. Missing values and empty boxes indicate data not available in these data sources.

Cambodia

	NUMBER (THOUSANDS)	RATE (PER 100 000 POPULATION)
Mortality (excludes HIV+TB)	3.1 (2-4.3)	19 (13–27)
Mortality (HIV+TB only)	0.41 (0.27-0.57)	2.6 (1.7-3.6)
Incidence (includes HIV+TB)	52 (36–72)	326 (224-447)
Incidence (HIV+TB only)	1.3 (0.89–1.8)	8.2 (5.6–11)
Incidence (MDR/RR-TB)**	1.2 (0.52-2.1)	7.2 (3.2–13)

ESTIMATED TB INCIDENCE BY AGE AND SEX (THOUSANDS), ^a 2017			
	0–14 YEARS	> 14 YEARS	TOTAL
Females	3.1 (2.9-3.4)	19 (15–22)	22 (17–27)
Males	3.4 (3.1-3.7)	27 (20-34)	30 (22–38)
Total	6.6 (5.8–7.4)	46 (31–60)	52 (36–72)

TB CASE NOTIFICATIONS, 2017	
Total cases notified	34 467
Total new and relapse	34 238
— % tested with rapid diagnostics at time of diagnosis	
— % with known HIV status	87%
— % pulmonary	66%
— % bacteriologically confirmed among pulmonary	54%
UNIVERSAL HEALTH COVERAGE AND SOCIAL PROTECTION	
TB treatment coverage (notified/estimated incidence), 2017	66% (48–96)

0	
TB patients facing catastrophic total costs	
TB case fatality ratio (estimated mortality/estir incidence), 2017	imated 0.07 (0.04–0.1)

TB/HIV CARE IN NEW AND RELAPSE TB	PATIENTS, 2017		
		NUMBER	(%)
Patients with known HIV-status w	ho are HIV-pos	itive 748	3%
— on antiretroviral therapy		698	93%
DRUG-RESISTANT TB CARE, 2017			
	NEW CASES	PREVIOUSLY TREATED CASES	TOTAL NUMBER ^C
Estimated MDR/RR-TB cases among notified pulmonary TB case	es		560 (290–840)
Estimated % of TB cases with MDR/RR-TB	1.8% (0.9–3)	11% (3.2–22)	
% notified tested for rifampicin resistance		33%	1 313
MDR/RR-TB cases tested for resis	tance to secon	d-line drugs	100
Laboratory-confirmed cases		MDR/RR-TB: 1	36, XDR-TB: 1
Patients started on treatment ^d		MDR/RR-TB: 1	43, XDR-TB: 1

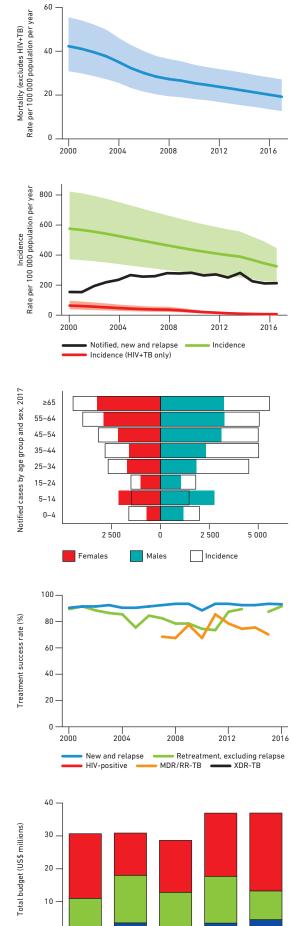
TREATMENT SUCCESS RATE AND COHORT SIZE

	SUCCESS	COHORT
New and relapse cases registered in 2016	94%	32 478
Previously treated cases, excluding relapse, registered in 2016	92%	38
HIV-positive TB cases registered in 2016		
MDR/RR-TB cases started on second-line treatment in 2015	71%	75
XDR-TB cases started on second-line treatment in 2015		0

TB PREVENTIVE TREATMENT, 2017

% of HIV-positive people (newly enrolled in care) on preventive trea	tment	21%
% of children (aged < 5) household contacts of bacteriologically-confirmed TB cases on preventive treatment	44%	(40–48)

TB FINANCING, 2018	
National TB budget (US\$ millions)	37
Funding source:	12% domestic, 24% international, 64% unfunded



3)

Data are as reported to WHO. Estimates of TB and MDR/RR-TB burden are produced by WHO in consultation with countries. Estimates are rounded and totals are computed prior to rounding.
^a Ranges represent uncertainty intervals.

⁶ MDR is TB resistant to rifampicin and isoniazid; RR is TB resistant to rifampicin.
⁶ Includes cases with unknown previous TB treatment history.
^d Includes patients diagnosed before 2017 and patients who were not laboratory-confirmed.

GLOBAL TUBERCULOSIS REPORT 2018

Funded domestically

2014

2015

2016

Funded internationally

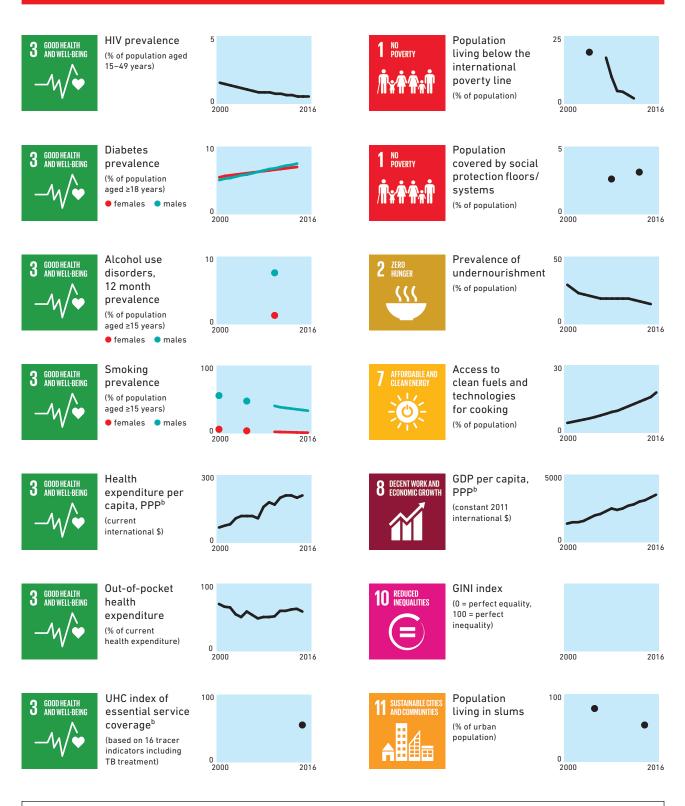
2017

2018

Unfunded

0

POPULATION 2017 16 MILLION



Targets for reductions in TB incidence and TB deaths set in WHO's End TB Strategy and the United Nations' Sustainable Development Goals (SDGs) are ambitious. Achieving them requires progress in reducing health-related risk factors for TB infection and disease, as well as broader social and economic determinants of TB infection and disease. WHO has developed a TB-SDG monitoring framework that comprises 14 indicators under seven SDGs for which there is evidence of an association with TB incidence. Further details are provided in **Chapter 2**.

^a Data sources: SDG indicators database, The World Bank, World Health Organization. Missing values and empty boxes indicate data not available in these data sources.

Central African Republic

ESTIMATES OF TB BURDEN, ^a 2017		
	NUMBER (THOUSANDS)	RATE (PER 100 000 POPULATION)
Mortality (excludes HIV+TB)	3.2 (1.8–4.9)	68 (38–105)
Mortality (HIV+TB only)	2.7 (1.4-4.4)	58 (31–94)
Incidence (includes HIV+TB)	20 (13–28)	423 (274–604)
Incidence (HIV+TB only)	6.2 (3.3–10)	134 (72–214)
Incidence (MDR/RR-TB) ^b	0.15 (0.084-0.23)	3.2 (1.8-4.9)

ESTIMATED TB INC	IDENCE BY AGE AND SEX (THOU	ISANDS),ª 2017	
	0–14 YEARS	> 14 YEARS	TOTAL
Females	1.3 (1.2–1.4)	6.3 (4.9–7.6)	7.5 (5.7–9.4)
Males	1.4 (1.3–1.6)	11 (7.6–14)	12 (8.4–16)
Total	2.7 (2.3–3.1)	17 (11–23)	20 (13–28)

TB CASE NOTIFICATIONS, 2017	
Total cases notified	9 819
Total new and relapse	9 664
— % tested with rapid diagnostics at time of diagnosis	3%
— % with known HIV status	77%
— % pulmonary	81%
— % bacteriologically confirmed among pulmonary	66%
UNIVERSAL HEALTH COVERAGE AND SOCIAL PROTECTION	
TB treatment coverage (notified/estimated incidence), 2017	49% (34–76)

TB patients facing catastrophic total costs	
TB case fatality ratio (estimated mortality/estimated incidence), 2017	0.31 (0.16-0.48)

	NUMBER	(%)
Patients with known HIV-status who are HIV-positive	2 0 9 8	28%
— on antiretroviral therapy	1 541	73%

NEW CASES	PREVIOUSLY TREATED CASES	TOTAL NUMBER ^C
ses		91 (0–190)
0.4% (0-2.2)	14% (10–18)	
0%	62%	268
stance to secon	Id-line drugs	2
	MDR/RR-TB:	93, XDR-TB: 2
	MDR/RR-TB: 8	86, XDR-TB: 0
	ses 0.4% (0-2.2) 0%	ses 0.4% (0-2.2) 14% (10-18)

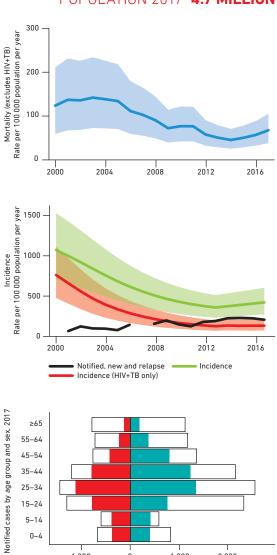
TREATMENT SUCCESS RATE AND COHORT SIZE

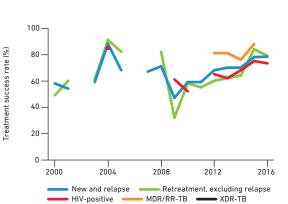
	SUCCESS	COHORT
New and relapse cases registered in 2016	78%	5 312
Previously treated cases, excluding relapse, registered in 2016	79%	186
HIV-positive TB cases registered in 2016	73%	2 053
MDR/RR-TB cases started on second-line treatment in 2015	88%	41
XDR-TB cases started on second-line treatment in 2015		0

TB PREVENTIVE TREATMENT, 2017

% of HIV-positive people (newly enrolled in care) on preventive treatment 0% % of children (aged < 5) household contacts of bacteriologically-confirmed TB cases on preventive treatment

TB FINANCING, 2018	
National TB budget (US\$ millions)	1.9
Funding source:	14% domestic, 53% international, 32% unfunded





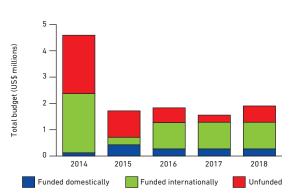
ò

Males

2 000

1 000

Incidence



Data are as reported to WHO. Estimates of TB and MDR/RR-TB burden are produced by WHO in consultation with countries. Estimates are rounded and totals are computed prior to rounding.
^a Ranges represent uncertainty intervals.

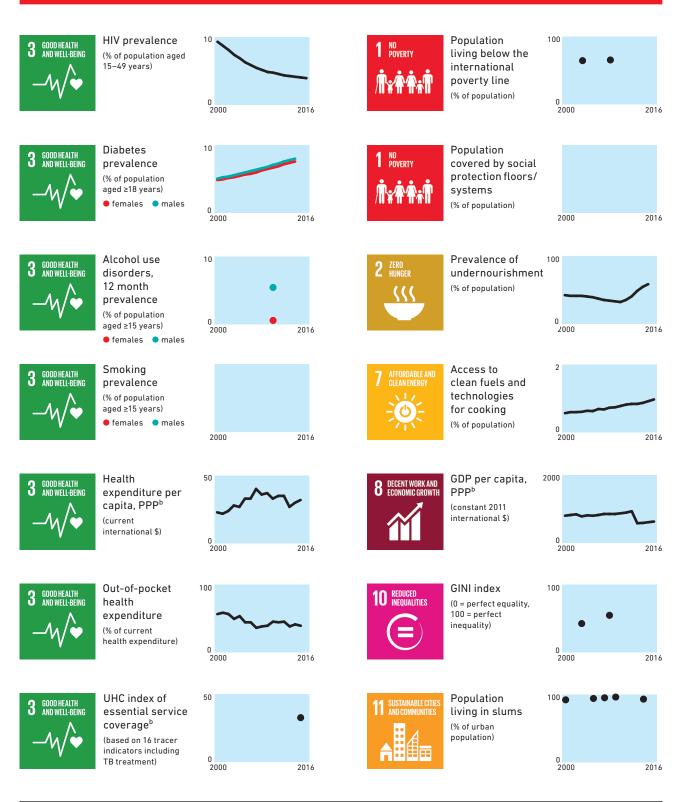
⁶ MDR is TB resistant to rifampicin and isoniazid; RR is TB resistant to rifampicin.
⁶ Includes cases with unknown previous TB treatment history.
^d Includes patients diagnosed before 2017 and patients who were not laboratory-confirmed.

5-14 0-4

1 000

Females

POPULATION 2017 4.7 MILLION



Targets for reductions in TB incidence and TB deaths set in WHO's End TB Strategy and the United Nations' Sustainable Development Goals (SDGs) are ambitious. Achieving them requires progress in reducing health-related risk factors for TB infection and disease, as well as broader social and economic determinants of TB infection and disease. WHO has developed a TB-SDG monitoring framework that comprises 14 indicators under seven SDGs for which there is evidence of an association with TB incidence. Further details are provided in **Chapter 2**.

^a Data sources: SDG indicators database, The World Bank, World Health Organization. Missing values and empty boxes indicate data not available in these data sources.

Congo

	NUMBER (THOUSANDS)	RATE (PER 100 000 POPULATION)
Mortality (excludes HIV+TB)	3.3 (1.9–5.2)	63 (36–98)
Mortality (HIV+TB only)	2.3 (1.2–3.7)	43 (22-71)
Incidence (includes HIV+TB)	20 (13–29)	376 (239–545)
Incidence (HIV+TB only)	5.3 (2.7-8.6)	100 (52–164)
Incidence (MDR/RR-TB) ^b	0.61 (0.25-1.1)	12 (4.8–21)

ESTIMATED TB INC	IDENCE BY AGE AND SEX (THOU	ISANDS),ª 2017	
	0–14 YEARS	> 14 YEARS	TOTAL
Females	1.3 (1.2–1.4)	6.3 (4.8–7.7)	7.6 (5.7–9.5)
Males	1.5 (1.3–1.6)	11 (7.6–14)	12 (8.3–16)
Total	2.8 (2.3-3.2)	17 (11–23)	20 (13–29)

TB CASE NOTIFICATIONS, 2017	
Total cases notified	10 263
Total new and relapse	10 005
— % tested with rapid diagnostics at time of diagnosis	5%
— % with known HIV status	13%
— % pulmonary	78%
— % bacteriologically confirmed among pulmonary	51%
UNIVERSAL HEALTH COVERAGE AND SOCIAL PROTECTION	
TB treatment coverage (notified/estimated incidence), 2017	51% (35–80)

TB treatment coverage (notified/estimated incidence), 2017	51% (35-80)
TB patients facing catastrophic total costs	
TB case fatality ratio (estimated mortality/estimated incidence), 2017	0.29 (0.15-0.46)

	NUMBER	(%)
Patients with known HIV-status who are HIV-positive	374	30%
— on antiretroviral therapy	272	73%

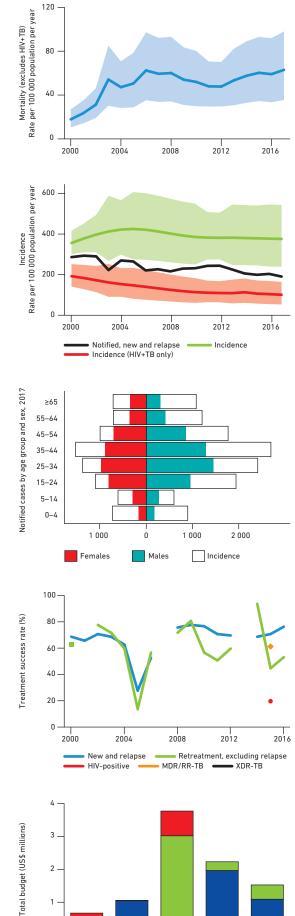
Bilde HEelennin ib enne, Een			
	NEW CASES	PREVIOUSLY TREATED CASES	TOTAL NUMBER ^C
Estimated MDR/RR-TB cases among notified pulmonary TB cas	ses		290 (170–420)
Estimated % of TB cases with MDR/RR-TB	2.5% (1.1–4.3)	21% (16–27)	
% notified tested for rifampicin resistance	<1%	89%	532
MDR/RR-TB cases tested for resi	stance to secon	d-line drugs	0
Laboratory-confirmed cases		MDR/RR-TB:	58, XDR-TB: 0
Patients started on treatment ^d		MDR/RR-TB:	28, XDR-TB: 0

TREATMENT SUCCESS RATE AND COHORT SIZE			
	SUCCESS	COHORT	
New and relapse cases registered in 2016	77%	10 656	
Previously treated cases, excluding relapse, registered in 2016	53%	232	
HIV-positive TB cases registered in 2016		0	
MDR/RR-TB cases started on second-line treatment in 2015	62%	13	
XDR-TB cases started on second-line treatment in 2015		0	

TB PREVENTIVE TREATMENT, 2017

% of HIV-positive people (newly enrolled in care) on preventive treatment % of children (aged < 5) household contacts of bacteriologically-confirmed TB cases on preventive treatment 4.1% (3.7-4.5)

TB FINANCING, 2018	
National TB budget (US\$ millions)	1.5
Funding source:	72% domestic, 28% international, 0% unfunded



Data are as reported to WHO. Estimates of TB and MDR/RR-TB burden are produced by WHO in consultation with countries. Estimates are rounded and totals are computed prior to rounding.
^a Ranges represent uncertainty intervals.

⁶ MDR is TB resistant to rifampicin and isoniazid; RR is TB resistant to rifampicin.
⁶ Includes cases with unknown previous TB treatment history.
^d Includes patients diagnosed before 2017 and patients who were not laboratory-confirmed.

Funded domestically

2014

2015

2016

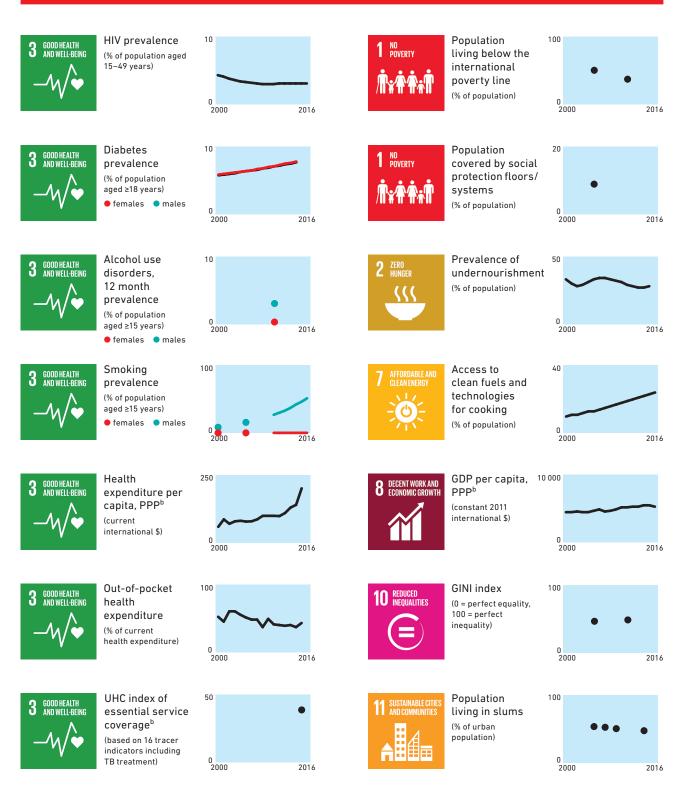
Funded internationally

2017

2018

Unfunded

0



Targets for reductions in TB incidence and TB deaths set in WHO's End TB Strategy and the United Nations' Sustainable Development Goals (SDGs) are ambitious. Achieving them requires progress in reducing health-related risk factors for TB infection and disease, as well as broader social and economic determinants of TB infection and disease. WHO has developed a TB-SDG monitoring framework that comprises 14 indicators under seven SDGs for which there is evidence of an association with TB incidence. Further details are provided in **Chapter 2**.

^a Data sources: SDG indicators database, The World Bank, World Health Organization. Missing values and empty boxes indicate data not available in these data sources.

Lesotho

ESTIMATES OF TB BURDEN, ^a 2017		
	NUMBER (THOUSANDS)	RATE (PER 100 000 POPULATION)
Mortality (excludes HIV+TB)	1 (0.55–1.7)	46 (25–75)
Mortality (HIV+TB only)	4.6 (2.9-6.7)	206 (128–302)
Incidence (includes HIV+TB)	15 (9.6–21)	665 (430-949)
Incidence (HIV+TB only)	11 (6.7–15)	470 (298-680)
Incidence (MDR/RR-TB) ^b	1.1 (0.61–1.7)	50 (27–78)

ESTIMATED TB INCIDENCE BY AGE AND SEX (THOUSANDS), ^a 2017			
	0–14 YEARS	> 14 YEARS	TOTAL
Females	1 (0.93–1.1)	4.6 (3.6-5.7)	5.7 (4.3–7.1)
Males	1.1 (1–1.3)	8 (5.7–10)	9.2 (6.4–12)
Total	2.2 (1.8–2.5)	13 (8.1–17)	15 (9.6–21)

TB CASE NOTIFICATIONS, 2017	
Total cases notified	7 271
Total new and relapse	7 117
— % tested with rapid diagnostics at time of diagnosis	
— % with known HIV status	92%
— % pulmonary	89%
— % bacteriologically confirmed among pulmonary	58%
UNIVERSAL HEALTH COVERAGE AND SOCIAL PROTECTION	
TB treatment coverage (notified/estimated incidence), 2017	48% (34-74)
TB patients facing catastrophic total costs	
TB case fatality ratio (estimated mortality/estimated incidence), 2017	0.39 (0.2–0.6)

TB/HIV CARE IN NEW AND RELAPSE TB PATIENTS, 2017			
	NUMBER	(%)	
Patients with known HIV-status who are HIV-positive	4 690	70%	
— on antiretroviral therapy	4 310	92%	

	NEW CASES	PREVIOUSLY TREATED CASES	TOTAL NUMBER ^c
Estimated MDR/RR-TB cases among notified pulmonary TB ca	ses		410 (330–490)
Estimated % of TB cases with MDR/RR-TB	4.8% (3.7–6)	14% (9.5–18)	
% notified tested for rifampicin resistance	63%		3 8 3 9
MDR/RR-TB cases tested for res	istance to secon	Id-line drugs	
Laboratory-confirmed cases		MDR/RR-TB:	351, XDR-TB:
Patients started on treatment ^d		MDR/RR-TB:	151, XDR-TB:

TREATMENT SUCCESS RATE AND COHORT SIZE			
	SUCCESS	COHORT	
New and relapse cases registered in 2016	77%	7 291	
Previously treated cases, excluding relapse, registered in 2016	68%	228	
HIV-positive TB cases registered in 2016	74%	5 085	
MDR/RR-TB cases started on second-line treatment in 2015	66%	210	
XDR-TB cases started on second-line treatment in 2015			

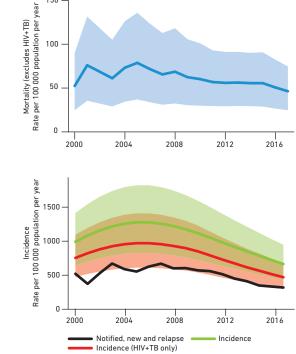
TB PREVENTIVE TREATMENT, 2017

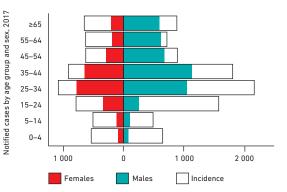
% of HIV-positive people (newly enrolled in care) on preventive treatment % of children (aged < 5) household contacts of bacteriologically-confirmed TB cases on preventive treatment

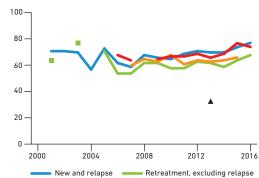
TB FINANCING, 2018	
National TB budget (US\$ millions)	3.3
Funding source:	30% domestic, 55% international, 15% unfunded

POPULATION 2017 2.2 MILLION

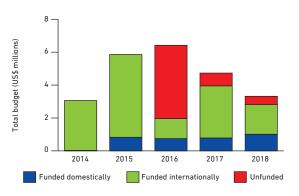
150









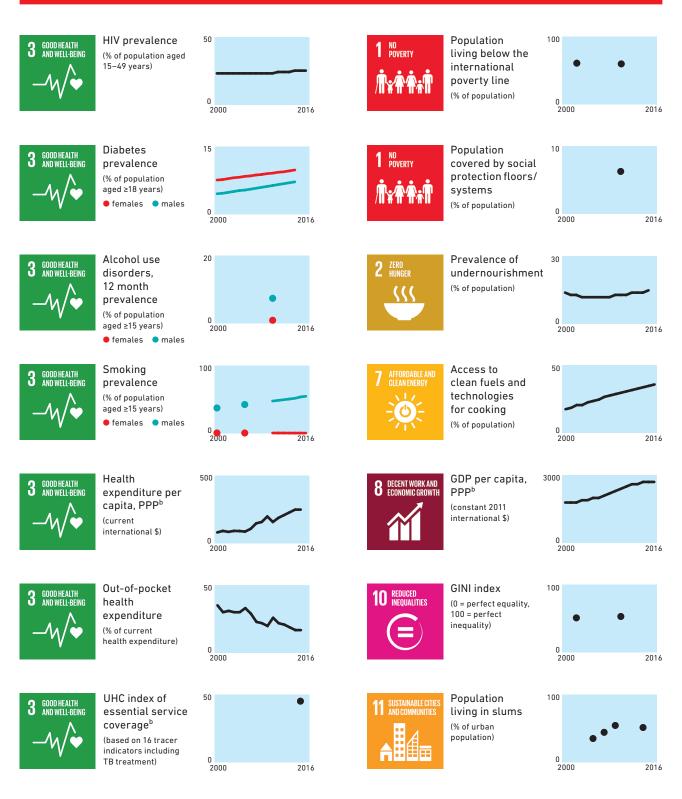


Data are as reported to WHO. Estimates of TB and MDR/RR-TB burden are produced by WHO in consultation with countries. Estimates are rounded and totals are computed prior to rounding.
^a Ranges represent uncertainty intervals.

⁶ MDR is TB resistant to rifampicin and isoniazid; RR is TB resistant to rifampicin.
⁶ Includes cases with unknown previous TB treatment history.
^d Includes patients diagnosed before 2017 and patients who were not laboratory-confirmed.

Treatment success rate (%)

218



Targets for reductions in TB incidence and TB deaths set in WHO's End TB Strategy and the United Nations' Sustainable Development Goals (SDGs) are ambitious. Achieving them requires progress in reducing health-related risk factors for TB infection and disease, as well as broader social and economic determinants of TB infection and disease. WHO has developed a TB-SDG monitoring framework that comprises 14 indicators under seven SDGs for which there is evidence of an association with TB incidence. Further details are provided in **Chapter 2**.

^a Data sources: SDG indicators database, The World Bank, World Health Organization. Missing values and empty boxes indicate data not available in these data sources.

Liberia

	NUMBER (THOUSANDS)	RATE (PER 100 000 POPULATION)
Mortality (excludes HIV+TB)	2.7 (1.6-4.1)	57 (34-86)
Mortality (HIV+TB only)	0.91 (0.57–1.3)	19 (12–28)
Incidence (includes HIV+TB)	15 (9.4–21)	308 (199–440)
Incidence (HIV+TB only)	2.2 (1.4-3.2)	47 (30–68)
Incidence (MDR/RR-TB)**	0.39 (0.15-0.74)	8.3 (3.2-16)

ESTIMATED TB INCIDENCE BY AGE AND SEX (THOUSANDS), ^a 2017			
	0–14 YEARS	> 14 YEARS	TOTAL
Females	0.91 (0.82-0.99)	4.6 (3.6-5.7)	5.5 (4.2-6.9)
Males	1 (0.9–1.1)	8 (5.7–10)	9 (6.3–12)
Total	1.9 (1.6–2.2)	13 (8.1–17)	15 (9.4–21)

TB CASE NOTIFICATIONS, 2017	
Total cases notified	7 728
Total new and relapse	7 728
— % tested with rapid diagnostics at time of diagnosis	17%
— % with known HIV status	70%
— % pulmonary	68%
— % bacteriologically confirmed among pulmonary	64%
UNIVERSAL HEALTH COVERAGE AND SOCIAL PROTECTION	
TB treatment coverage (notified/estimated incidence), 2017	53% (37–82)
TB patients facing catastrophic total costs	
TB case fatality ratio (estimated mortality/estimated incidence), 2017	0.26 (0.14-0.4)

TB/HIV CARE IN NEW AND RELAPSE TB PATIENTS, 2017		
	NUMBER	(%)
Patients with known HIV-status who are HIV-positive	827	15%
— on antiretroviral therapy	347	42%

DRUG-RESISTANT TB CARE, 2017			
	NEW CASES	PREVIOUSLY TREATED CASES	TOTAL NUMBER ^C
Estimated MDR/RR-TB cases among notified pulmonary TB ca	ses		150 (65–230)
Estimated % of TB cases with MDR/RR-TB	2.5% (1.1–4.3)	14% (10–18)	
% notified tested for rifampicin resistance	43%	100%	3 382
MDR/RR-TB cases tested for res	istance to secon	d-line drugs	19
Laboratory-confirmed cases		MDR/RR-TB: 8	38, XDR-TB: 0
Patients started on treatment ^d		MDR/RR-TB:	55, XDR-TB: 0

TREATMENT SUCCESS RATE AND COHORT SIZE		
	SUCCESS	COHORT
New and relapse cases registered in 2016	77%	7 374
Previously treated cases, excluding relapse, registered in 2016	50%	127
HIV-positive TB cases registered in 2016		
MDR/RR-TB cases started on second-line treatment in 2015		
XDR-TB cases started on second-line treatment in 2015		

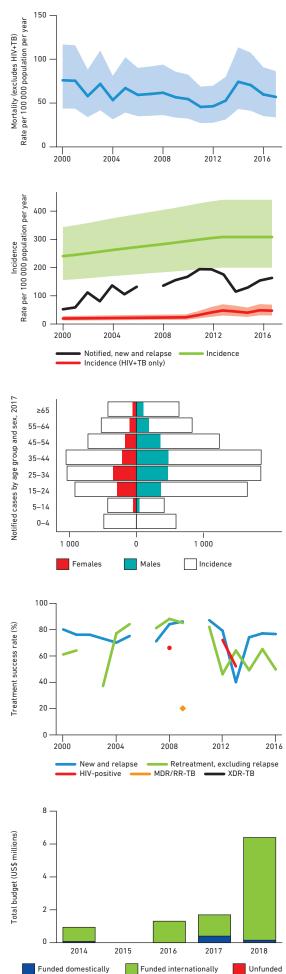
TB PREVENTIVE TREATMENT, 2017

% of HIV-positive people (newly enrolled in care) on preventive tre	atment
% of children (aged < 5) household contacts of	
bacteriologically-confirmed TB cases on preventive treatment	5.8% (5.3–6.3)

TB FINANCING, 2018 National TB budget (US\$ millions)

Funding source: 2% domestic, 98% international, 0% unfunded

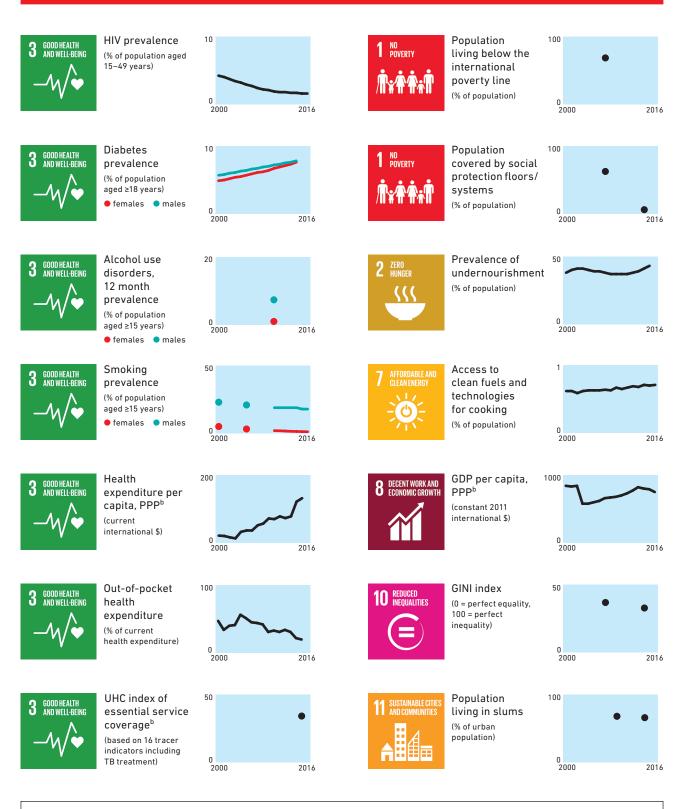
POPULATION 2017 4.7 MILLION



 consultation with countries. Estimates are rounded and totals are computed prior to rounding.
^a Ranges represent uncertainty intervals. ⁶ MDR is TB resistant to rifampicin and isoniazid; RR is TB resistant to rifampicin.
⁶ Includes cases with unknown previous TB treatment history.
^d Includes patients diagnosed before 2017 and patients who were not laboratory-confirmed.

Data are as reported to WHO. Estimates of TB and MDR/RR-TB burden are produced by WHO in

6.4



Targets for reductions in TB incidence and TB deaths set in WHO's End TB Strategy and the United Nations' Sustainable Development Goals (SDGs) are ambitious. Achieving them requires progress in reducing health-related risk factors for TB infection and disease, as well as broader social and economic determinants of TB infection and disease. WHO has developed a TB-SDG monitoring framework that comprises 14 indicators under seven SDGs for which there is evidence of an association with TB incidence. Further details are provided in **Chapter 2**.

^a Data sources: SDG indicators database, The World Bank, World Health Organization. Missing values and empty boxes indicate data not available in these data sources.

Namibia

ESTIMATES OF TB BURDEN, ^a 2017		
	NUMBER (THOUSANDS)	RATE (PER 100 000 POPULATION)
Mortality (excludes HIV+TB)	0.75 (0.48-1.1)	30 (19–43)
Mortality (HIV+TB only)	0.8 (0.55–1.1)	31 (22–43)
Incidence (includes HIV+TB)	11 (8.2–14)	423 (324–535)
Incidence (HIV+TB only)	3.9 (2.5-5.5)	153 (99–219)
Incidence (MDR/RR-TB)**	0.95 (0.65–1.3)	37 (26–51)

ESTIMATED TB INCIDENCE BY AGE AND SEX (THOUSANDS), ^a 2017			
	0–14 YEARS	> 14 YEARS	TOTAL
Females	0.88 (0.81-0.94)	3.6 (3.1-4.1)	4.4 (3.7-5.2)
Males	0.92 (0.85-0.99)	5.4 (4.4-6.3)	6.3 (5.1–7.5)
Total	1.8 (1.6–2)	8.9 (6.9–11)	11 (8.2–14)

TB CASE NOTIFICATIONS, 2017	
Total cases notified	8 855
Total new and relapse	8 575
— % tested with rapid diagnostics at time of diagnosis	100%
— % with known HIV status	98%
— % pulmonary	82%
— % bacteriologically confirmed among pulmonary	83%
UNIVERSAL HEALTH COVERAGE AND SOCIAL PROTECTION	
TB treatment coverage (notified/estimated incidence), 2017	80% (63–100)

TB patients facing catastrophic total costs	
i b patiente racing cataoti opine totat cooto	
TB case fatality ratio (estimated mortality/estimated incidence), 2017	0.15 (0.1–0.2)

TB/HIV CARE IN NEW AND RELAPSE TB PATIENTS, 2017		
	NUMBER	(%)
Patients with known HIV-status who are HIV-positive	3 139	36%
— on antiretroviral therapy	3 021	96%
DRUG-RESISTANT TB CARE, 2017		
	UCIV TREATER CACES	TOTAL NUMBER

	NEW CASES	PREVIOUSLY TREATED CASES	TOTAL NUMBER ^c
Estimated MDR/RR-TB cases among notified pulmonary TB ca	ses		470 (410–540)
Estimated % of TB cases with MDR/RR-TB	5% (4.1–5.9)	12% (9.4–14)	
% notified tested for rifampicin resistance			
MDR/RR-TB cases tested for res	istance to secor	ıd-line drugs	78
Laboratory-confirmed cases		MDR/RR-TB: 40	9, XDR-TB: 14
Patients started on treatment ^d		MDR/RR-TB: 41	0, XDR-TB: 13

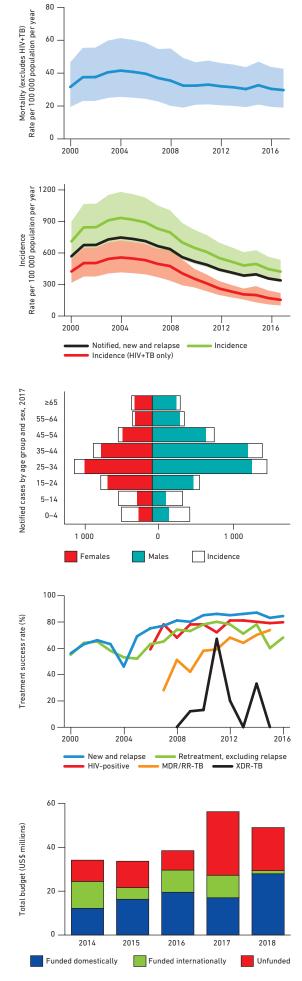
TREATMENT SUCCESS RATE AND COHORT SIZE		
	SUCCESS	COHORT
New and relapse cases registered in 2016	84%	8 857
Previously treated cases, excluding relapse, registered in 2016	68%	297
HIV-positive TB cases registered in 2016	80%	3 410
MDR/RR-TB cases started on second-line treatment in 2015	74%	288
XDR-TB cases started on second-line treatment in 2015	0%	2

TB PREVENTIVE TREATMENT, 2017

% of HIV-positive people (newly enrolled in care) on preventive treatmer	nt 15%
% of children (aged < 5) household contacts of bacteriologically-confirmed TB cases on preventive treatment	34% (31–37)

TB FINANCING, 2018	
National TB budget (US\$ millions)	49
Funding source:	57% domestic, 3% international, 40% unfunded

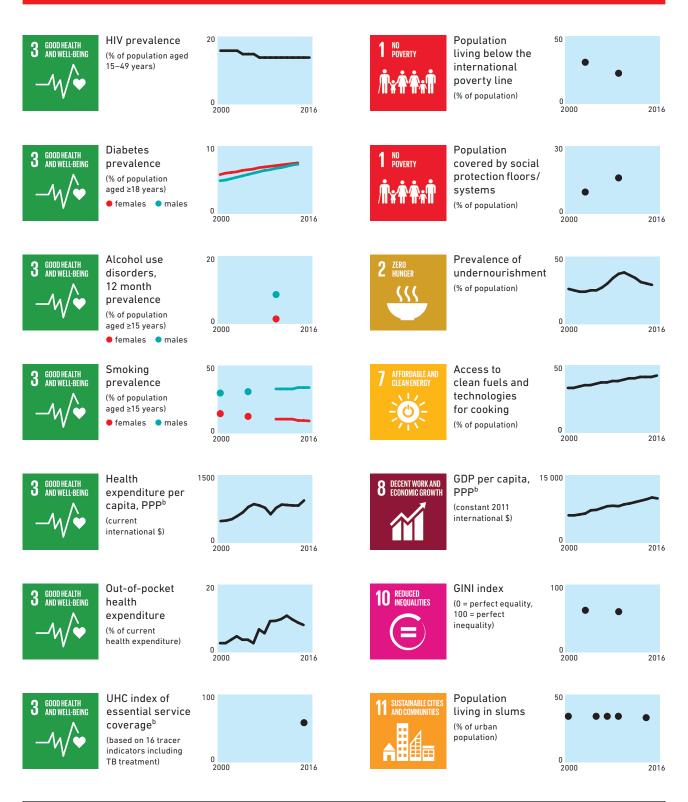
POPULATION 2017 2.5 MILLION



Data are as reported to WHO. Estimates of TB and MDR/RR-TB burden are produced by WHO in a Ranges represent uncertainty intervals. Estimates are rounded and totals are computed prior to rounding.
^a Ranges represent uncertainty intervals. Estimates of TB incidence and mortality for Namibia will be reviewed after final results from their national TB prevalence survey are available in

2019. ^b MDR is TB resistant to rifampicin and isoniazid; RR is TB resistant to rifampicin.

Includes cases with unknown previous TB treatment history. Includes patients diagnosed before 2017 and patients who were not laboratory-confirmed. d



Targets for reductions in TB incidence and TB deaths set in WHO's End TB Strategy and the United Nations' Sustainable Development Goals (SDGs) are ambitious. Achieving them requires progress in reducing health-related risk factors for TB infection and disease, as well as broader social and economic determinants of TB infection and disease. WHO has developed a TB-SDG monitoring framework that comprises 14 indicators under seven SDGs for which there is evidence of an association with TB incidence. Further details are provided in **Chapter 2**.

^a Data sources: SDG indicators database, The World Bank, World Health Organization. Missing values and empty boxes indicate data not available in these data sources.

Papua New Guinea

ESTIMATES OF TB BURDEN, ^a 2017		
	NUMBER (THOUSANDS)	RATE (PER 100 000 POPULATION)
Mortality (excludes HIV+TB)	4.3 (2.9-6)	53 (36–73)
Mortality (HIV+TB only)	0.93 (0.51–1.5)	11 (6.2–18)
Incidence (includes HIV+TB)	36 (29–43)	432 (352-521)
Incidence (HIV+TB only)	3.5 (2-5.5)	43 (24-66)
Incidence (MDR/RR-TB)**	1.9 (1.2–2.8)	23 (15–34)

ESTIMATED TB INCIDENCE BY AGE AND SEX (THOUSANDS), ^a 2017			
	0–14 YEARS	> 14 YEARS	TOTAL
Females	1.8 (1.7–1.9)	11 (9.7–12)	13 (11–14)
Males	2 (1.9–2.1)	21 (18–24)	23 (19–27)
Total	3.9 (3.6-4.1)	32 (26–38)	36 (29–43)

TB CASE NOTIFICATIONS, 2017	
Total cases notified	27 934
Total new and relapse	26 294
— % tested with rapid diagnostics at time of diagnosis	
— % with known HIV status	45%
— % pulmonary	57%
— % bacteriologically confirmed among pulmonary	26%
UNIVERSAL HEALTH COVERAGE AND SOCIAL PROTECTION	
TB treatment coverage (notified/estimated incidence), 2017	74% (61–91)
TB patients facing catastrophic total costs	
TB case fatality ratio (estimated mortality/estimated incidence), 2017	0.15 (0.1–0.21)

TB/HIV CARE IN NEW AND RELAPSE TB PATIENTS, 2017		
	NUMBER	(%)
Patients with known HIV-status who are HIV-posi	tive 791	7%
— on antiretroviral therapy	753	95%
DRUG-RESISTANT TB CARE, 2017		
NEW CASES	PREVIOUSLY TREATED CASES	TOTAL NUMBER ^C

			i e i ne i i e i i e i i
Estimated MDR/RR-TB cases among notified pulmonary TB ca	ses		960 (650–1 300)
Estimated % of TB cases with MDR/RR-TB	3.4% (1.7–5)	26% (15–36)	
% notified tested for rifampicin resistance	11%	56%	15 090
MDR/RR-TB cases tested for res	istance to secon	id-line drugs	161
Laboratory-confirmed cases		MDR/RR-TB: 35	6, XDR-TB: 13
Patients started on treatment ^d		MDR/RR-TB: 35	6, XDR-TB: 15

	SUCCESS	COHORT
New cases registered in 2016	62%	27 294
Previously treated cases registered in 2016	17%	2 457
HIV-positive TB cases registered in 2016		
MDR/RR-TB cases started on second-line treatment in 2015	68%	149
XDR-TB cases started on second-line treatment in 2015	64%	11

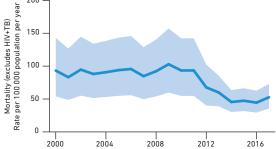
TB PREVENTIVE TREATMENT, 2017

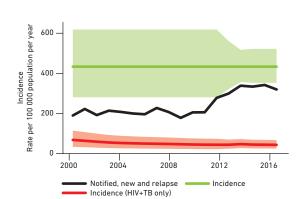
% of HIV-positive people (newly enrolled in care) on preventive treatment 16% % of children (aged < 5) household contacts of bacteriologically-confirmed TB cases on preventive treatment

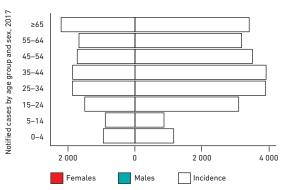
TB FINANCING, 2018 National TB budget (US\$ millions) 28 50% domestic, 21% international, 29% unfunded Funding source:

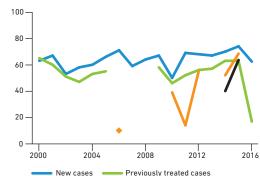
POPULATION 2017 8.3 MILLION

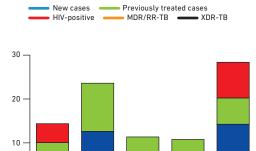
200











2016

Funded internationally

2017

2018

Unfunded

Data are as reported to WHO. Estimates of TB and MDR/RR-TB burden are produced by WHO in consultation with countries. Estimates are rounded and totals are computed prior to rounding.
^a Ranges represent uncertainty intervals.

⁶ MDR is TB resistant to rifampicin and isoniazid; RR is TB resistant to rifampicin.
⁶ Includes cases with unknown previous TB treatment history.
^d Includes patients diagnosed before 2017 and patients who were not laboratory-confirmed.

Funded domestically

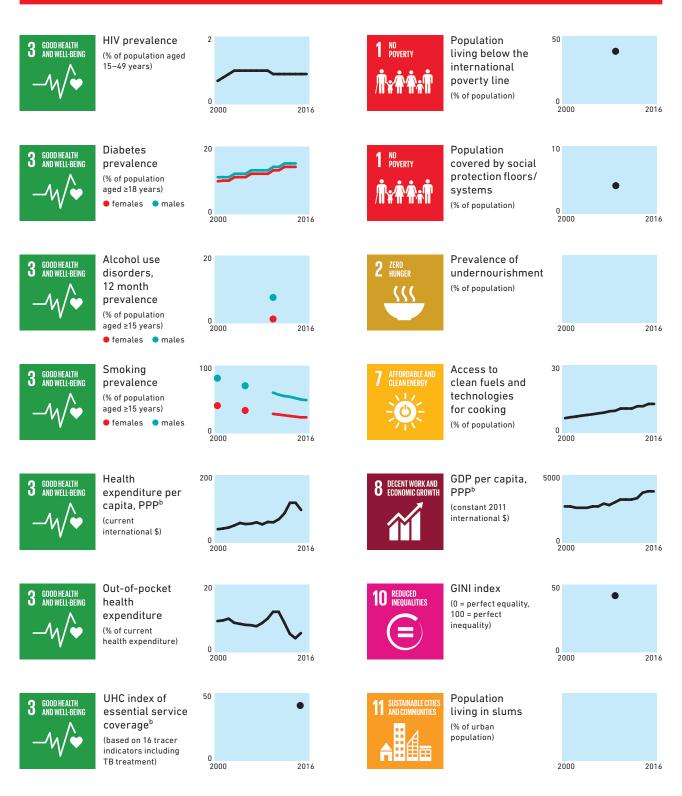
2014

2015

0

Treatment success rate (%)

Total budget (US\$ millions)



Targets for reductions in TB incidence and TB deaths set in WHO's End TB Strategy and the United Nations' Sustainable Development Goals (SDGs) are ambitious. Achieving them requires progress in reducing health-related risk factors for TB infection and disease, as well as broader social and economic determinants of TB infection and disease. WHO has developed a TB-SDG monitoring framework that comprises 14 indicators under seven SDGs for which there is evidence of an association with TB incidence. Further details are provided in **Chapter 2**.

^a Data sources: SDG indicators database, The World Bank, World Health Organization. Missing values and empty boxes indicate data not available in these data sources.

Sierra Leone

ESTIMATES OF TB BURDEN, ^a 2017		
	NUMBER (THOUSANDS)	RATE (PER 100 000 POPULATION)
Mortality (excludes HIV+TB)	3 (1.8-4.5)	39 (23–59)
Mortality (HIV+TB only)	0.78 (0.49-1.1)	10 (6.5–15)
Incidence (includes HIV+TB)	23 (15–33)	301 (193–431)
Incidence (HIV+TB only)	2.8 (1.8-4)	37 (24–53)
Incidence (MDR/RR-TB)**	0.66 (0.27-1.2)	8.8 (3.6–16)

ESTIMATED TB INCIDENCE BY AGE AND SEX (THOUSANDS), ^a 2017			
	0–14 YEARS	> 14 YEARS	TOTAL
Females	1.2 (1.1–1.3)	8.1 (6.2–10)	9.3 (6.9–12)
Males	1.3 (1.2–1.4)	12 (8.6–16)	13 (9.3–17)
Total	2.5 (2.2–2.8)	20 (13–28)	23 (15–33)

Total cases notified	16 142
Total new and relapse	15 935
— % tested with rapid diagnostics at time of diagnosis	3%
— % with known HIV status	98%
— % pulmonary	93%
— % bacteriologically confirmed among pulmonary	65%

TB treatment coverage (notified/estimated incidence), 2017	70% (49–110)
TB patients facing catastrophic total costs	
TB case fatality ratio (estimated mortality/estimated incidence), 2017	0.17 (0.09–0.27)

TB/HIV CARE IN NEW AND RELAPSE TB PATIENTS, 2017		
	NUMBER	(%)
Patients with known HIV-status who are HIV-posit	ive 1 970	12%
— on antiretroviral therapy	1 911	97%
DRUG-RESISTANT TB CARE, 2017 New cases	PREVIOUSLY TREATED CASES	TOTAL NUMBER
Estimated MDR/RR-TB cases among notified pulmonary TB cases		430 (200–660)
Estimated % of TB cases with MDR/RR-TB 2.5% (1.1–4.3)	14% (10–18)	

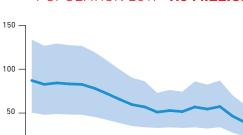
with MDR/RR-IB	
% notified tested for rifampicin resistance	456
MDR/RR-TB cases tested for resistance to	o second-line drugs 109
Laboratory-confirmed cases	MDR/RR-TB: 174, XDR-TB: 0
Patients started on treatment ^d	MDR/RR-TB: 104, XDR-TB: 0

TREATMENT SULLESS RATE AND LUHURT SIZE	SUCCESS	COHORT
New and relapse cases registered in 2016	89%	12 497
Previously treated cases, excluding relapse, registered in 2016	72%	239
HIV-positive TB cases registered in 2016		
MDR/RR-TB cases started on second-line treatment in 2015		
XDR-TB cases started on second-line treatment in 2015		

TB PREVENTIVE TREATMENT, 2017

% of HIV-positive people (newly enrolled in care) on preventive treatment 22% % of children (aged < 5) household contacts of bacteriologically-confirmed TB cases on preventive treatment

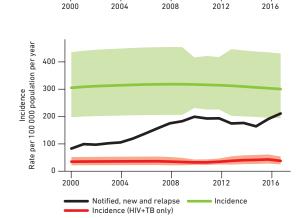
TB FINANCING, 2018	
National TB budget (US\$ millions)	16
Funding source:	2% domestic, 76% international, 23% unfunded

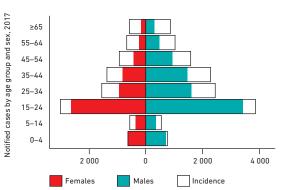


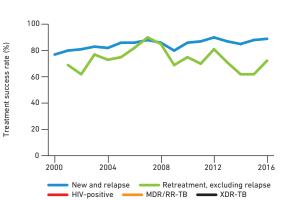
Mortality (excludes HIV+TB) per 100 000 population per year 100

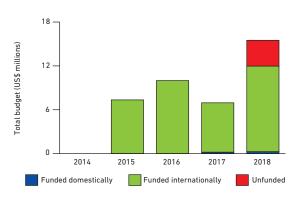
Rate 0

50



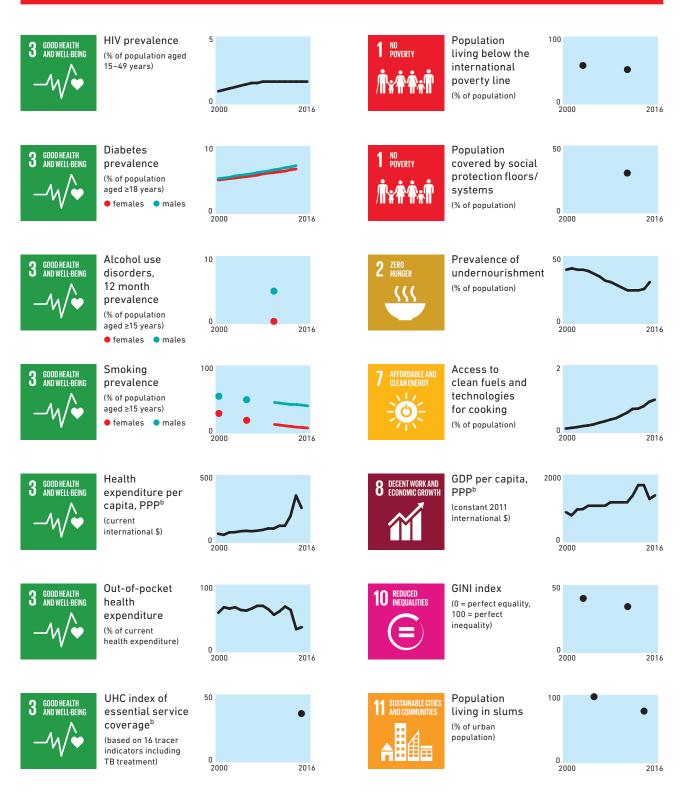






Data are as reported to WHO. Estimates of TB and MDR/RR-TB burden are produced by WHO in consultation with countries. Estimates are rounded and totals are computed prior to rounding.
^a Ranges represent uncertainty intervals.

⁶ MDR is TB resistant to rifampicin and isoniazid; RR is TB resistant to rifampicin.
⁶ Includes cases with unknown previous TB treatment history.
^d Includes patients diagnosed before 2017 and patients who were not laboratory-confirmed.



Targets for reductions in TB incidence and TB deaths set in WHO's End TB Strategy and the United Nations' Sustainable Development Goals (SDGs) are ambitious. Achieving them requires progress in reducing health-related risk factors for TB infection and disease, as well as broader social and economic determinants of TB infection and disease. WHO has developed a TB-SDG monitoring framework that comprises 14 indicators under seven SDGs for which there is evidence of an association with TB incidence. Further details are provided in **Chapter 2**.

^a Data sources: SDG indicators database, The World Bank, World Health Organization. Missing values and empty boxes indicate data not available in these data sources.

Zambia

ESTIMATES OF TB BURDEN, ^a 2017		
	NUMBER (THOUSANDS)	RATE (PER 100 000 POPULATION)
Mortality (excludes HIV+TB)	5 (2.9–7.7)	30 (17–45)
Mortality (HIV+TB only)	13 (8.2–19)	76 (48–110)
Incidence (includes HIV+TB)	62 (40-88)	361 (234–514)
Incidence (HIV+TB only)	36 (23–52)	210 (135–302)
Incidence (MDR/RR-TB) ^b	1.9 (0.67-3.8)	11 (3.9–22)

ESTIMATED TB INCIDENCE BY AGE AND SEX (THOUSANDS), ³ 2017			
	0–14 YEARS	> 14 YEARS	TOTAL
Females	3.6 (3.2-3.9)	20 (16–25)	24 (18–30)
Males	4 (3.6-4.3)	34 (24-44)	38 (26-49)
Total	7.5 (6.5–8.5)	54 (34–74)	62 (40-88)

TB CASE NOTIFICATIONS, 2017	
Total cases notified	37 203
Total new and relapse	36 010
— % tested with rapid diagnostics at time of diagnosis	28%
— % with known HIV status	93%
— % pulmonary	84%
— % bacteriologically confirmed among pulmonary	53%
UNIVERSAL HEALTH COVERAGE AND SOCIAL PROTECTION	
TB treatment coverage (notified/estimated incidence), 2017	58% (41-90)
TB patients facing catastrophic total costs	

TB case fatality ratio (estimated mortality/estimated incidence), 2017	0.3 (0.17-0.46)
--	-----------------

TB/HIV CARE IN NEW AND RELAPSE TB PATIENTS, 2017		
	NUMBER	(%)
Patients with known HIV-status who are HIV-positive	20 362	59%
— on antiretroviral therapy	18 341	90%

DRUG-RESISTANT TB CARE, 2017			
	NEW CASES	PREVIOUSLY TREATED CASES	TOTAL NUMBER ^C
Estimated MDR/RR-TB cases among notified pulmonary TB ca	ises		1 300 (850–1 800)
Estimated % of TB cases with MDR/RR-TB	1.1% (0.34–2.3)	18% (12–26)	
% notified tested for rifampicin resistance	23%	9%	10 591
MDR/RR-TB cases tested for res	istance to secon	d-line drugs	0
Laboratory-confirmed cases		MDR/RR-TB: 5	46, XDR-TB: 0
Patients started on treatment ^d		MDR/RR-TB: 2	70, XDR-TB: 0

TREATMENT SUCCESS RATE AND COHORT SIZE

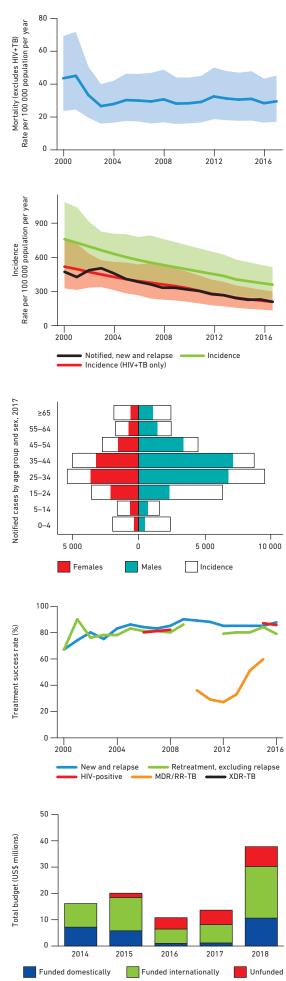
	SUCCESS	COHORT
New and relapse cases registered in 2016	88%	38 326
Previously treated cases, excluding relapse, registered in 2016	79%	1 827
HIV-positive TB cases registered in 2016	86%	21 655
MDR/RR-TB cases started on second-line treatment in 2015	60%	99
XDR-TB cases started on second-line treatment in 2015		0

TB PREVENTIVE TREATMENT, 2017

% of HIV-positive people (newly enrolled in care) on preventive treatment	18%
% of children (aged < 5) household contacts of bacteriologically-confirmed TB cases on preventive treatment 3.89	% (3.5–4.2)

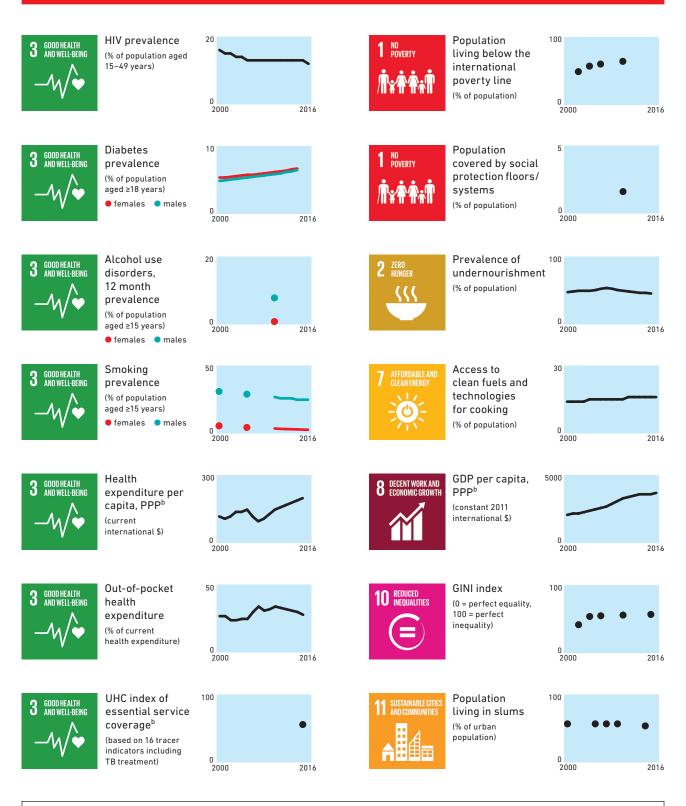
TB FINANCING, 2018	
National TB budget (US\$ millions)	38
Funding source:	28% domestic, 52% international, 20% unfunded

POPULATION 2017 17 MILLION



Data are as reported to WHO. Estimates of TB and MDR/RR-TB burden are produced by WHO in consultation with countries. Estimates are rounded and totals are computed prior to rounding.
^a Ranges represent uncertainty intervals.

⁶ MDR is TB resistant to rifampicin and isoniazid; RR is TB resistant to rifampicin.
⁶ Includes cases with unknown previous TB treatment history.
^d Includes patients diagnosed before 2017 and patients who were not laboratory-confirmed.



Targets for reductions in TB incidence and TB deaths set in WHO's End TB Strategy and the United Nations' Sustainable Development Goals (SDGs) are ambitious. Achieving them requires progress in reducing health-related risk factors for TB infection and disease, as well as broader social and economic determinants of TB infection and disease. WHO has developed a TB-SDG monitoring framework that comprises 14 indicators under seven SDGs for which there is evidence of an association with TB incidence. Further details are provided in **Chapter 2**.

^a Data sources: SDG indicators database, The World Bank, World Health Organization. Missing values and empty boxes indicate data not available in these data sources.

^b GDP = gross domestic product; PPP = purchasing power parity; UHC = universal health coverage

Zimbabwe

	NUMBER (THOUSANDS)	RATE (PER 100 000 POPULATION)
Mortality (excludes HIV+TB)	2 (1.3–2.9)	12 (7.7–17)
Mortality (HIV+TB only)	6.3 (4.5-8.5)	38 (27–51)
Incidence (includes HIV+TB)	37 (27-47)	221 (164–287)
Incidence (HIV+TB only)	23 (15–33)	140 (90–199)
Incidence (MDR/RR-TB) ^b	2.3 (1.4-3.5)	14 (8.5–21)

ESTIMATED TB INCIDENCE BY AGE AND SEX (THOUSANDS), ^a 2017			
	0–14 YEARS	> 14 YEARS	TOTAL
Females	2.6 (2.4-2.8)	13 (11–15)	15 (12–18)
Males	2.9 (2.7-3.1)	18 (15–22)	21 (17–26)
Total	5.6 (4.9-6.2)	31 (23–39)	37 (27–47)

TB CASE NOTIFICATIONS, 2017	
Total cases notified	26 401
Total new and relapse	25 848
— % tested with rapid diagnostics at time of diagnosis	
— % with known HIV status	100%
— % pulmonary	89%
— % bacteriologically confirmed among pulmonary	58%
UNIVERSAL HEALTH COVERAGE AND SOCIAL PROTECTION	
TB treatment coverage (notified/estimated incidence), 2017	71% (55–96)
TB patients facing catastrophic total costs	
TB case fatality ratio (estimated mortality/estimated incidence), 2017	0.23 (0.15–0.32)

TB/HIV CARE IN NEW AND RELAPSE TB P/	ATIENTS, 2017			
			NUMBER	(%)
Patients with known HIV-status wh	o are HIV-pos	itive	16 602	63%
— on antiretroviral therapy			14 300	86%
DRUG-RESISTANT TB CARE, 2017				
	NEW CASES	PREVIOU	JSLY TREATED CASES	TOTAL NUMBER ^c
Estimated MDR/RR-TB cases among notified pulmonary TB cases	s			1 300 (920–1 600)
Estimated % of TB cases with MDR/RR-TB	4.6% (3–6.2)	14	\$% (8.9–20)	
% notified tested for rifampicin resistance				7 385

Laboratory-confirmed cases	MDR/RR-TB: 474, XDR-TB: 4
Patients started on treatment ^d	MDR/RR-TB: 439, XDR-TB: 3

TREATMENT SUCCESS RATE AND COHORT SIZE		
	SUCCESS	COHORT
New and relapse cases registered in 2016	81%	26 618
Previously treated cases, excluding relapse, registered in 2016	70%	735
HIV-positive TB cases registered in 2016	78%	16 520
MDR/RR-TB cases started on second-line treatment in 2015	44%	433
XDR-TB cases started on second-line treatment in 2015	80%	5

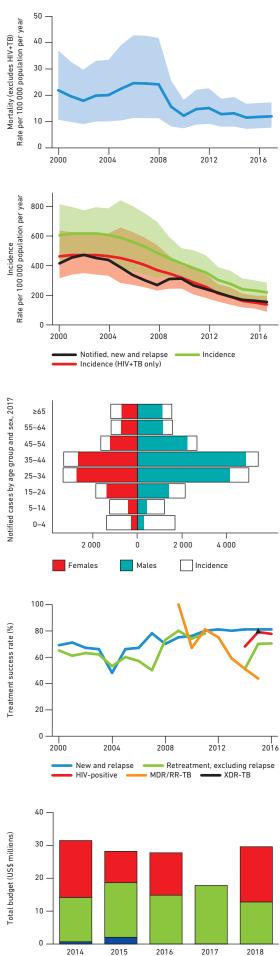
TB PREVENTIVE TREATMENT, 2017

% of HIV-positive people (newly enrolled in care) on preventive treatmen	nt ^e 11%
% of children (aged < 5) household contacts of bacteriologically-confirmed TB cases on preventive treatment	24% (22–26)

TB FINANCING, 2018	
National TB budget (US\$ millions)	30
Funding source:	domestic, 43% international, 57% unfunded

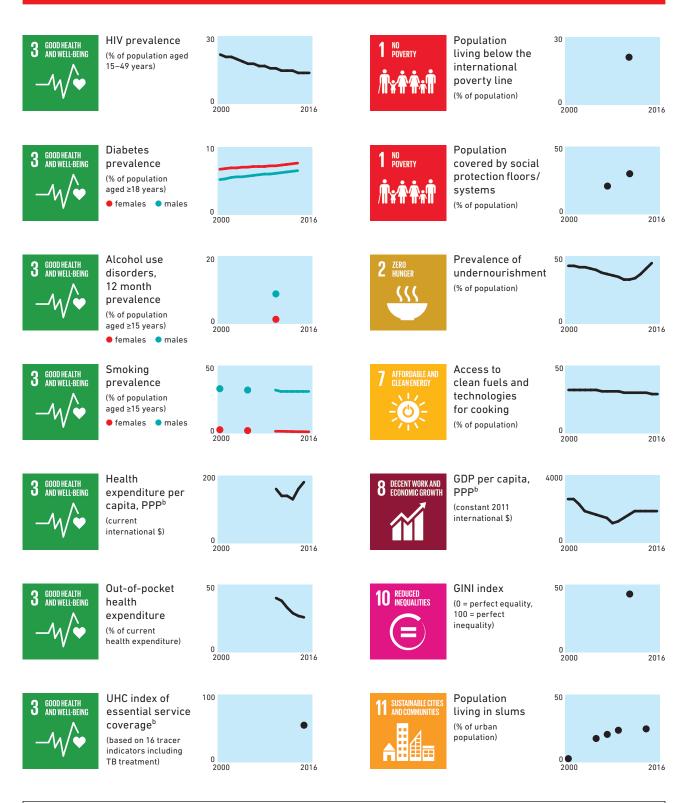
Data are as reported to WHO. Estimates of TB and MDR/RR-TB burden are produced by WHO in consultation with countries. Estimates are rounded and totals are computed prior to rounding. ^a Ranges represent uncertainty intervals.

POPULATION 2017 17 MILLION



Funded internationally

Unfunded



Targets for reductions in TB incidence and TB deaths set in WHO's End TB Strategy and the United Nations' Sustainable Development Goals (SDGs) are ambitious. Achieving them requires progress in reducing health-related risk factors for TB infection and disease, as well as broader social and economic determinants of TB infection and disease. WHO has developed a TB-SDG monitoring framework that comprises 14 indicators under seven SDGs for which there is evidence of an association with TB incidence. Further details are provided in **Chapter 2**.

^a Data sources: SDG indicators database, The World Bank, World Health Organization. Missing values and empty boxes indicate data not available in these data sources.