

Evidence and research gaps identified during development of policy guidelines for tuberculosis



**World Health
Organization**

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Acronyms and abbreviations

GDG	Guideline Development Group
LF-LAM	lateral flow urine lipoarabinomannan
MDR-TB	multidrug-resistant tuberculosis
NAAT	nucleic acid amplification test
TPT	tuberculosis preventive treatment
TB	tuberculosis
TB-LAMP	loop-mediated isothermal amplification for detection of <i>M. tuberculosis</i>
WHO	World Health Organization

Executive summary

Tuberculosis (TB) is a communicable disease that is a major cause of ill health and one of the leading causes of death worldwide. Until the coronavirus pandemic, TB was the leading cause of death from a single infectious agent, ranking above HIV. Although it is a largely preventable, treatable and curable disease, it claims more than one million lives each year and affects millions more, with enormous impacts on families and communities. The End TB Strategy aspires for a 90% reduction in the number of TB deaths and an 80% reduction in TB incidence in 2030 from those in 2015.

Achievement of this goal requires innovative tools and strategies as well as rapid progress towards universal access to health care. It is critical that global policies remain firmly grounded in the best possible evidence in order to optimize the work of national TB programmes and governments. WHO issues recommendations to guide countries in choosing life-saving interventions and effective, efficient, sustainable models of care that have an impact. Experts convened by WHO to provide advice in guideline development also have an important role in identifying important gaps in research and implementation science that would overcome barriers to better care for people affected by TB.

This document summarizes the research gaps compiled by guideline development groups during the latest updates of WHO guidelines on TB (2013–2021). It also provides information about advances in research and development. We trust that this document will guide decision-makers who fund and implement research to better focus their research agendas towards the priorities of TB programmes and affected populations.

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