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Editorial

World TB Day 2025 Theme: “Yes! We Can End TB: Commit, Invest, Deliver,” promising a targeted approach to fight the oldest known infectious disease in the world

Sankalp Yadav^{1*}, Amruta Nadar², Madhan Jeyaraman^{3,4}, Gautam Rawal⁵, Naveen Jeyaraman³

¹Dept. of Medicine, Shri Madan Lal Khurana Chest Clinic, MCD, New Delhi, India

²Mohalla Clinic, Bakkarwala, New Delhi, India

³Dept. of Orthopaedics, ACS Medical College and Hospital, Dr MGR Educational and Research Institute, Chennai, Tamil Nadu, India

⁴Clinical Research, Virginia Tech India, Dr MGR Educational and Research Institute, Chennai, Tamil Nadu, India

⁵Dept. of Respiratory Medical Critical Care, Max Super Speciality Hospital, Saket, New Delhi, India

Abstract

Tuberculosis is a deadly infectious disease that continues to loom large in the densely populated countries of Africa and Asia. Globally, World TB Day is observed annually on the 24th of March. The theme of this year's World TB Day 2025 is “Yes! We can end TB: commit, invest, deliver.” It is very important, as to achieve the global targets of tuberculosis elimination, it requires focused efforts, and this editorial sheds light on the same.

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Tuberculosis, an infectious disease, is an outcome of infection by *Mycobacterium tuberculosis*.¹ Tuberculosis is a preventable and treatable disease and has been known for ages, yet it continues to be the most common cause of death from an infectious disease.² Globally, World TB Day is celebrated on the 24th of March, and this year's theme, as designated by the World Health Organization (WHO) and STOP TB Partnership, is “Yes! We Can End TB: Commit, Invest, Deliver”.³

The theme of this year's World TB Day is remarkable with the inclusion of three key components that are essential for the fight against this deadly disease. The term “Commit” describes the leaders of governments and nations' promise to end tuberculosis at the 2023 United Nations High-Level Meeting (HLM). Nevertheless, without specific measures, financial support, national plans, and regulations, this pledge will remain unattainable.³

“Invest” pertains to using a variety of funding sources and investments to sufficiently fund TB responses.³ Since 2000, an estimated 79 million lives have been saved due to international efforts to eliminate tuberculosis. But these advances could be undone by the sudden and severe cuts in global health funding that are currently taking place.⁴ Following the financial reduction, some of the highest-burden countries have experienced significant interruptions in the TB response, according to early reports to WHO. Countries in the WHO South-East Asian and Western Pacific Regions are following those in the WHO African Region, which is being most affected. Devastating TB response breakdowns are occurring in 27 countries, with disastrous outcomes like service delivery being undermined by a lack of human resources; diagnostic services being seriously disturbed, which delays detection and treatment; collapse of data and surveillance systems, jeopardizing the monitoring and control of diseases; and deteriorating community engagement initiatives, such as active case detection,

*Corresponding author: Sankalp Yadav
Email: drsankalpyadav@gmail.com

screening, and contact tracing, resulting in postponed diagnosis and elevated risks of transmission. Moreover, there is a severe shortage of funds for TB research and TB vaccine development.⁴

"Deliver" implies turning promises into real advantages for TB patients, including increasing the use of evidence-based treatments, actively seeking out new cases, diagnosing and treating patients early, providing preventive treatment, and providing high-quality care for patients with drug-resistant TB.³

In short, there is a dire need to work extensively in the global fight against TB. Although significant progress has been achieved in the past years in TB diagnosis and care, it is still insufficient. It is imperative that developed nations commit to the cause and help the countries that are having a very high burden of TB. Further, newer funding sources should be traced and donors encouraged so that TB elimination efforts should not be affected. Furthermore, evidence-based management strategies, which would be beneficial to the patients, are the need of the hour. It is also essential that stakeholders should unite and work proactively in the efforts towards TB elimination by 2030.

Conflicts of Interest

None declared.

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