



MESSAGE FROM THE CEO AND BOARD CHAIR

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Dear Stakeholders, Partners, and Patients,

2015 will be even more exciting as we prepare to introduce an appropriate, child-friendly pediatric formulation of first-line therapy.

In 2014, we made tremendous progress, especially in the clinical development arena. TB Alliance and our partners are launching a wave of next-generation clinical trials that have the potential to transform the TB epidemic.

One of the most critical developments over the last year has been the launch of the Phase 3 STAND trial (Shortening Treatments by Advancing Novel Drugs), which tests a regimen with one novel drug, pretomanid (formerly PA-824), along with moxifloxacin and pyrazinamide (PaMZ). The regimen shows promise for its ability to shorten and improve treatment for drug-sensitive, active TB – and more dramatically, for many patients with multi-drug resistant TB. The STAND trial is the first Phase 3 trial to test a single regimen against both drug-sensitive TB and MDR-TB. It is a truly global endeavor and is planned to run at 50 sites across 15 countries.

TB Alliance also launched a trial this year which tests a treatment with two novel drugs, pretomanid and bedaquiline, in combination with pyrazinamide. That regimen, known as BPaZ, could be effective in an even greater number of patients and potentially further shorten the duration of TB therapy.

We are preparing to launch a study called NiX-TB, which will support a larger effort to test three drugs with virtually no existing resistance. This is a seminal step on the road to actualizing our vision of an ultra-short, affordable, and universal regimen to treat all patients with active TB. That trial will begin with patients with XDR-TB whose survival rate is dismal and who are truly bereft of treatment options.

Two thousand and fifteen will be an even more exciting year, as we prepare to introduce an appropriate, child-friendly pediatric treatment – the first that has ever been marketed that is compliant with current WHO guidelines. We will continue to advocate to bring pediatric TB out of the shadows, improve treatment, and reduce



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childhood deaths from TB.

Without our broad network of partners, we would not be able to do any of this work. Some of the most critical partnerships we have are with communities in which we run our trials. Those who have truly given of themselves are the patients who participate in the studies.

By expanding our work, into areas of MDR-TB, XDR-TB, and pediatric TB, we expand our potential impact to help bring this deadly pandemic under control.

None of this would have been remotely possible without the generosity of our donors. We can't begin to thank them enough for helping us, but more importantly, helping those affected by TB make the progress that's been made.

However, to cross the finish line, we will need more resources than we have had in the past. We invite others to join the fight. We need everyone's help – that's what it takes to tackle TB.

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