



# Child Friendly TB Medicines

## Improved TB cures are now reaching children and improving their chances of survival

### About childhood TB

Tuberculosis (TB) is a major cause of illness and death among children. Each year, at least 1 million children get TB and another 210,000 die—that’s 575 children that needlessly die each and every day from the disease.

For too long, there were no appropriate medicines for children. When the World Health Organization (WHO) revised their dosing guidelines for childhood TB treatment, drug developers did not respond with new products, due to a lack of market incentive.

This left health providers and caregivers around the world to improvise treatments for children with TB, splitting or crushing a number of bitter-tasting pills in hopes of achieving the correct dose. This guessing game makes treatment more difficult and can render the medicines ineffective and increase rates of drug-resistant TB in children.

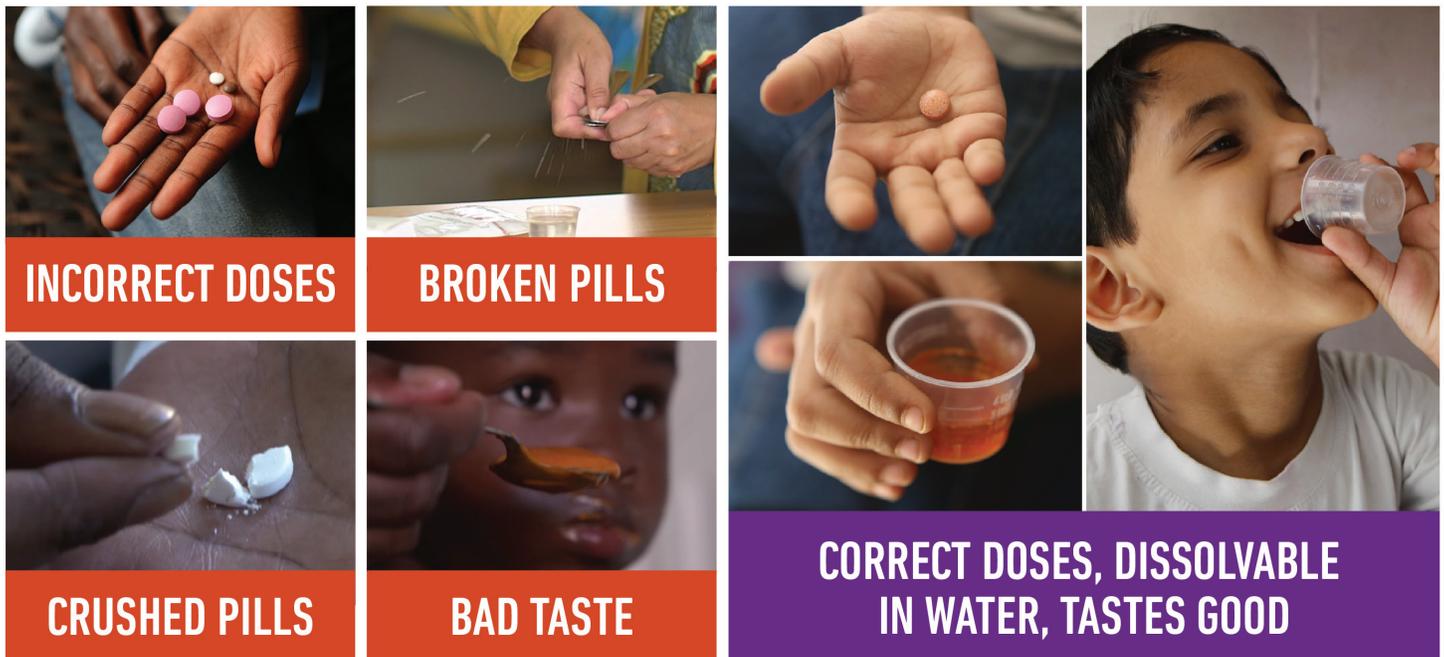
### Improved medicines for children available globally

TB Alliance and partners have now developed and brought to market quality-assured, affordable, child-friendly TB medicines in the correct internationally-recommended dosages. This was made possible largely through a grant from UNITAID. These improved medicines should improve treatment and child survival from TB. Many countries have procured and are now in the process of introducing these new medicines.

### About child-friendly TB medicines

The new medicines are fixed dose combinations (FDCs), combining the proper doses of the most commonly used drugs to treat TB in children into one child-friendly pill. The products include rifampicin 75 mg + isoniazid 50 mg + pyrazinamide 150 mg, which is used for the first two months of treatment, followed by

**Around the world, inadequate TB treatment for children (left) is in the process of being replaced by child-friendly TB medicines in correct doses (right)**





rifampicin 75 mg + isoniazid 50 mg for the remaining four months. They are available in a fruit flavor that is palatable for children.

These medicines are not new treatments, but are correct dosages and improved formulations. They are simple for providers and parents to administer, and easy for children to take. No crushing or chopping is needed. They are made to dissolve in water in just a few seconds, allowing for easier consumption by children.

### Rapid progress in global uptake of new treatments

Nearly 30 countries are in the process of introducing the products. Kenya is the first to roll-out the improved treatments on a national basis, while other countries are using the medicines in pilot projects to inform further scale up. Overall, enough new product has been purchased to treat more than 221,000 children – more than half of the reported pediatric TB cases around the world.

The new TB medicines are available through the Stop TB Partnership’s Global Drug Facility and the product’s manufacturer (Macleods Pharmaceuticals). Ordering information is available at [www.tballiance.org/child-friendly-medicines](http://www.tballiance.org/child-friendly-medicines)

### Sustaining progress and achieving a TB-free future

Our goals will not be achieved until all children in need have ready access to effective and appropriate therapy. While there is good progress in the roll-out of improved childhood medicines for drug-sensitive TB, there are huge gaps that must be filled to ensure that children have access to medicines designed for them.

Priorities for TB Alliance include:

- Continue to catalyze countries and work in partnership to improve case finding and overall uptake efforts
- Introduce child-friendly formulations of single-dose TB drugs (ethambutol and pyrazinamide) to improve the toolkit for childhood TB
- Introduce child-friendly formulations of isoniazid, as part of a larger effort to prevent TB in vulnerable populations, including children under 5
- Develop pediatric formulations of selected existing drugs to treat multi-drug resistant TB
- Continue to improve the pathway for the development of child-friendly versions of novel TB treatment regimens to address the long gap between the introduction of new treatments and when child formulations are projected to reach the market.

Through this work, we look forward to a time when we can end this global pandemic and no child dies of TB.

# 210,000 children died from TB in 2015, 50% more than the previous year’s estimate.