

From

21st March, 2024

Dr. T. Sundararaman,
Former ED, NHSRC, & Co-Chair- India TB Forum
Email – sundar2016@gmail.com, m 9987438253

&

Dr. Yogesh Jain
Member, India TB Forum.
[Email- yogeshjain.chhattisgarh@gmail.com](mailto:yogeshjain.chhattisgarh@gmail.com)
M 9425530357

To

The Secretary, MOHFW,
Government of India, New Delhi
& Chairperson,
India TB Forum.

Sub: Crisis in Availability of ATT drugs in the National TB Elimination Program.

Dear Sir,

Both of us, Dr Yogesh Jain and Dr T. Sundararaman are experienced public health experts now serving as member and co-chairperson of the India TB Forum.

We seek to draw your urgent attention to the precarious situation regarding the availability of the fixed dose combinations of anti-tuberculosis drugs in Chhattisgarh and several other parts of the country in the National Tuberculosis Elimination program (NTEP). This is based on personal observations of one of the authors of this letter, and on the basis of reports and feedbacks we have from civil society members or providers in many states- including Rajasthan, Jharkhand, Madhya Pradesh and Maharashtra, Karnataka. As a measure of coping, many centres are using pediatric formulations which are in stocks and supplementing with individual drugs and/or reducing the number of days for which doses are issued at each visit. We have received oral reports of many coming for their monthly medication but having to return empty-handed. The situation with regard to medicines for drug resistant tuberculosis is said to be even worse. There are reports of serious interruptions in laboratory reagents especially for molecular diagnostics but even in microscopy

In Chhattisgarh the State tuberculosis officer, has issued letters to the districts to make their own arrangements for procuring these Tuberculosis drugs from their own sources- but this is something that they cannot easily do. Further we have unconfirmed reports that ATT drugs have been dropped from the State Essential drugs list and this is making procurement difficult and expensive. We are informed that in most other states too, drug procurement is

having to be done locally, in whatever formulations or packages are available. It would be impossible to maintain quality and continuity of care under such circumstances.

We are not sure whether the constraint is financial or whether it is operational, and how soon the crisis will end. We are alarmed by the consequences of these drug and reagent shortages. We are sure that the ministry is aware that treatment interruptions on such a scale will compromise the outcomes of individual patients as well as the programme, as also worsen the drug resistance situation. It will undermine the trust of our private health care partners and will weaken the active search for missing cases. At a time when we are just recovering from the disruptions of the Covid pandemic, this is another crisis we could have done without.

The need of the hour is to ensure that adequate drugs are available for all patients who are already on treatment or are to be initiated on treatment. On a longer-term perspective, we need to re-think the supply side chain for TB drugs and re-agents assisting many states with adequate systems in place and centralizing only when needed. This should also be seen as wake-up call to re-examine many aspects of the overall strategy and its aspirations and align it better with the ground level realities.

Yours sincerely,

Signed

Dr. T. Sundararaman (Co-Chair – India TB Forum)

&

Dr. Yogesh Jain (Member, India TB Forum)