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Media Release

51st Union World Conference on Lung Health (virtual) opens with focus on impact of COVID-19 on global tuberculosis response and the state of play of SARS-CoV-2 scientific research

President Bill Clinton addresses delegates at the Opening Ceremony

New global survey of potential COVID-19 vaccine acceptance demonstrates widespread hesitancy across communities in Europe and the United States

Tuesday 20th October, 2020 — The inaugural virtual edition of the world’s leading conference on lung health began today with a focus on the links between tuberculosis (TB), lung health and the COVID-19 pandemic.

[The 51st Union World Conference on Lung Health](#) is convened by the [International Union Against Tuberculosis and Lung Disease](#) (The Union), the world’s first global health NGO, which is also celebrating its 100th anniversary this year. Delegates from 135 countries, including over 450 survivors of TB and other lung diseases, are attending the conference, originally set to take place in Seville, Spain.

President Bill Clinton and World Health Organization (WHO) Director-General **Dr Tedros Adhanom Ghebreyesus** will both address the Opening Ceremony at 08:00 EST/14:00 CEST.

“While many people around the world are witnessing first-hand the hardship and disruption that an infectious disease can cause, for those of us dedicated to ending TB and lung disease globally, this is in many ways familiar territory,” said **José Luis Castro**, Executive Director of The Union.

“The theme of this year’s conference *Advancing Prevention* has never been more appropriate; failure to invest in the health of our citizens and defeat preventable, treatable and curable diseases such as TB, will leave us terribly exposed to the novel coronavirus and future pandemics. Science and evidence-based policy must be at the heart of everything we do, including the development and roll out of a safe and scalable COVID-19 vaccine.”

The opening press conference featured **Ren Minghui**, WHO Assistant Director-General for Universal Health Coverage/Communicable and Noncommunicable Diseases, UNAIDS Deputy Executive Director **Shannon Hader** and evidence from two studies, one examining

the link between the TB and COVID-19 pandemics and the other publishing the results in [*Nature Medicine*](#) of a global survey of people's acceptance of a COVID-19 vaccine.

Last week WHO warned in its [2020 Global TB report](#) that the COVID-19 pandemic would cause 200 000-40 000 excess TB deaths in 2020, effectively eroding a decade of progress.

"All our progress on ending TB is at risk if we don't step up a unified response," said **Ren Minghui**.

"Our joint efforts need to be stronger at this intersection between COVID-19 and lung health. We should all work together to identify opportunities for converting this situation to our benefit that could help advance the scale-up of new tools for TB prevention and care, towards achieving Universal Health Coverage."

At the same time, the WHO report pointed to encouraging news around scale up of TB preventive treatment (TPT) for people living with HIV: an impressive 3.8 million people living with HIV received TPT in 2019. A further 1.8 million people received TPT in 2018, bringing the global total to 5.3 million people living with HIV receiving TPT since 2018, 88 percent of the global target of six million people living with HIV on TPT between 2008 and 2020 set at the 2018 United Nations High-Level Meeting on TB and thus on track to reach this target ahead of schedule.

"TPT for people living with HIV has been WHO policy since 2004, but it took decades to overcome health worker and community doubts, mobilize specific funding for TPT and invest in research for shorter, more effective and more acceptable treatment regimens to finally see real progress which reduces the risk of TB disease and deaths among people living with HIV", said **Shannon Hader**, UNAIDS Deputy Executive Director.

"Now is not the time to slow down, we should raise the target and increase access to and use of the best TPT regimens for all in need. Also, we should build on our successes and go faster with other groups, too—for example, greater and more rapid progress in TPT among children in households of people with active TB."

Authors of two studies being released at the Union World Conference also shared findings related to the intersection of COVID-19 and TB and the acceptability of a COVID-19 vaccine across 19 countries:

Report on the efficacy of virtual -and community delivery- platforms in Uganda to deliver MDR-TB treatment during the national COVID-19 response

Due to the nation-wide lock-down in Uganda many patients with multi-drug resistant (MDR-TB) couldn't attend their monthly hospital reviews for clinical- and laboratory- assessment.

Over 100 healthcare workers were oriented on TB/COVID-19 integration, infection prevention and control and provided with N95 respirators and face masks.

A total of 204 patients attended their monthly clinic reviews and had their drugs restocked. Of these, 135 (66 percent) had their clinical reviews carried out in the community.

No contact tracing was undertaken to minimize community contact.

Enock Kizito, MDR-TB Advisor with the USAID Defeat TB Project in Uganda reported that the project and the national TB and leprosy program (NTLP) held virtual meetings with all

MDR-TB treatment initiation centres to plan continuation of care. The following interventions were agreed and implemented:

Kizito noted that the use of virtual platforms together with community-based patient reviews and drug deliveries ensured continuity of care for patients with MDR-TB during the COVID-19 outbreak in Uganda.

Abstract: Use of virtual -and community delivery- platforms to prevent MDR-TB treatment interruption during the national COVID-19 response: lessons from Uganda (OA-14-590-22)

Session: Track D13 COVID-19 (Channel 4, Thursday October 22, 12:30-13:50 CEST)

“It is clear that interventions of this kind are going to be essential going forward,” said **José Luis Castro**. “Millions of people’s lives are at stake in the short-term, and in the long-term they also potentially face the risk for developing new drug resistance to TB, with much poorer outcomes. We cannot forget communities in low- and middle-income countries that are being doubly hit by the pandemic and the crisis of TB.”

Results from a survey across 19 countries of people’s attitudes towards a potential COVID-19 vaccine

13,426 people in 19 countries were surveyed to determine potential acceptance rates and factors influencing acceptance of a COVID-19 vaccine.

71.5 percent of participants reported they would be very or somewhat likely to take a COVID-19 vaccine; 61.4 percent reported they would accept their employer’s recommendation to do so. Differences in acceptance rates ranged from almost 9 in 10 (China) to less than 55 percent (Russia).

With the possible exception of Canada, support for COVID-19 vaccination was moderate at best in Western democracies such as the UK, USA, France, Germany, Italy and Spain.

Jeffrey Lazarus, Head of the Health Systems Research Group at the Barcelona Institute for Global Health (ISGlobal, an institution supported by “la Caixa” Foundation), in Spain, reported that in most of the 19 countries surveyed in the study, current levels of willingness to accept a COVID-19 vaccine are insufficient to meet the requirements for community immunity.

Lazarus noted that respondents reporting higher levels of trust in information from government sources were more likely to accept a vaccine and take their employer’s advice to do so.

Abstract: A global survey of potential acceptance of a COVID-19 vaccine (published today in [Nature Medicine](#))

Special Session, SARS-CoV2: The hope for a vaccine (Channel 1, Wednesday October 21, 15:00-16:20 CEST)

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[Media registration](#) is open and free to all accredited media representatives.

Full Union Conference Programme available [here](#).

See how The Union is supporting the [COVID-19 response](#).

Further Information:

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About the [51st Union World Conference on Lung Health](#)

The Union World Conference on Lung Health, convened by [The Union](#), is the world's largest gathering of clinicians and public health workers, health programme managers, policymakers, researchers and advocates working to end the suffering caused by lung disease, with a focus specifically on the challenges faced by low-and lower-middle income populations. Of the 10 million people who die each year from lung diseases, some 80 percent live in these resource-limited settings.

Organising international conferences on TB and related subjects has been a core activity of The Union since its founding in 1920.

Twitter: @UnionConference

About [The Union](#)

The Union was founded in 1920 and is the world's first global health organisation. We are a global leader in ending TB, we fight the tobacco industry, and we solve key problems in treating major diseases. We use science to design the best treatments and policies for the most pressing public health challenges affecting people living in poverty around the world. The Union's members, staff and consultants operate in more than 140 countries and embody our core values of accountability, independence, quality and solidarity.

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