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## PRESS RELEASE

### Tuberculosis and COVID-19:

### Stop TB USA Calls for Strengthening Public Health Programs to Fight Co-Pandemics

*TB programs support coronavirus elimination efforts with contact tracing expertise*

**Atlanta, Georgia** — America and the world may be ill-prepared to fight concurrent global pandemics in COVID-19 and tuberculosis (TB) — both largely airborne infectious diseases and significant public health threats. [Stop TB USA](#), a coalition committed to TB elimination, is calling for strengthening public health programs to fight the co-pandemics.

The coronavirus response is placing an extra burden on already underfunded TB programs as specialists are tapped to teach contact tracing — a public health tactic recognized [by the CDC](#) as essential to stopping the chain of transmission of highly infectious disease. The practice has been a pillar of TB programs for more than a century and is crucial to pushing COVID-19 and TB curves downward.

“In Los Angeles County, [our TB team](#) supports contact tracing both with training and sometimes execution, even as TB resources are already stretched,” says Julie M. Higashi, MD, PhD, President, [National Tuberculosis Controllers Association](#). “While it’s important to support the COVID-19 response, we don’t want to lose ground on TB elimination. In public health, we know first-hand that none of us are safe until all of us are safe.”

Historically, TB has hurt low-income Americans, and restricted travel limits their access to TB diagnosis and treatment. Now these individuals are at increased risk for coronavirus transmission due to difficulties practicing social distancing and work in essential jobs outside their homes. There also is concern that COVID-19 could have serious medical effects on TB patients as both diseases often attack the respiratory system.

“The Colorado Department of Public Health TB program has been cut by 4% at a time when we’re already working on the coronavirus response,” says [Randall Reves](#), MD, Professor of Medicine, University of Colorado School of Medicine. “We are living in challenging times and it’s important for all in public health to contribute. Yet, fighting two pandemics at once is having a negative impact on TB diagnosis and treatment, and a cut in funding will only make matters worse.”

TB programs across the country have been impacted. A CDC article published on July 23 in the [Morbidity and Mortality Weekly Report](#), notes that the COVID-19 response has affected multiple sectors of public health, as well as recommended preventive screening, and clinical care. The article implores the country to address the backlog of health services delayed or not provided while public health resources focus on COVID-19. The U.S. domestic TB elimination program is just one example. If essential TB program activities are not sustained, gains made in reducing U.S. TB cases will be at risk.

Stop TB USA appeals to the public and lawmakers to ensure that the TB programs continue, without interruption. Increased funding is needed to strengthen efforts to identify, treat and prevent TB, including [drug resistant](#) strains and [latent TB infection](#). Tuberculosis is the leading infectious disease killer worldwide with [1.5 million](#) people dying annually.



**Julie Higashi, MD, PhD**



**Randall Reves, MD, PhD**

### **Julie Higashi, MD, PhD**

Dr. Julie Higashi is currently the Director of the TB Control Program in Los Angeles County Department of Public Health. She earned her MD and PhD in Biomedical Engineering degrees at Case Western Reserve University in Cleveland, Ohio. Dr. Higashi completed a residency in internal medicine and infectious disease fellowship at the University of California, San Francisco (UCSF). She has been a public health physician since 2007, after serving as the TB Controller in Santa Clara County and the city and county of San Francisco prior to Los Angeles County. During her tenure in these positions, Dr. Higashi worked with collaborators and established a publication record on TB control topics spanning policy, molecular epidemiology, contact investigation, national guidelines, and TB diagnostics. During her time as Director of the TB Control Program, she has worked with collaborators to expand electronic DOT, resurrect the Coalition to End TB in LA, and align resources for TB services to address the California goal for TB elimination by 2040. She is currently faculty in the UCSF Curry International Training Center and volunteer faculty for U.C. Los Angeles. Dr. Higashi has also served as the President of the California TB Controller's Association and is President of the National TB Controller's Association. She is a member on the Stop TB USA Advisory Board.

### **Randall Reves, MD, PhD**

Dr. Reves is a Professor of Medicine in Infectious Diseases at the University of Colorado Denver School of Medicine and Professor of Epidemiology at the University of Colorado School of Public Health. His interest in infectious diseases spiked when he supported a smallpox eradication program in Bangladesh as a medical student in 1975. Dr. Reves' interest in TB was similarly spurred by investigation of a school and community outbreak of drug-resistant TB in Mississippi while working as a CDC Epidemic Intelligence Service officer from 1977-79. He served for 22 years as Medical Director for the Denver Metro TB Control Program at Denver Public Health Department and a staff physician in Infectious Diseases at Denver Health Medical Center. Dr. Reves retired in February 2013. He remains active as a volunteer TB clinician at Denver Public Health Department. Dr. Reves continues to participate in TB clinical and epidemiologic research at the Denver Public Health Department. Internationally, Dr. Reves has served as a consultant on

multidrug resistant TB. His research focus is TB diagnosis, treatment, and prevention funded largely through the CDC Division of TB Elimination's TB Trials Consortium and TB Epidemiologic Studies Consortium. He is a founding member of Stop TB USA.