

EDITORIAL

The Need for Research and Innovation to End Tuberculosis Epidemic in Ethiopia

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In Ethiopia, Tuberculosis (TB) is still a major public health problem. The country is still among the 30 high TB, multidrug resistant tuberculosis (MDR-TB) and Tuberculosis/Human Immunodeficiency Virus (TB/HIV) burden countries with high number of missed and infectious TB cases in the community (1). The 2019 incidence of TB in Ethiopia was 157 per 100,000 populations (1). Ethiopia is on track in achieving one of the three targets of the global End TB Strategy evidenced by meeting its milestone of reducing incidence by 21% from the 2015 estimate (target 20%); however, the progress on targets to reduce mortality was only 15% (target 35%). Likewise, MDR-TB is a public health concern as the number of cases seen is increasing in Ethiopia (2). Ethiopia has adopted the global target in Ending the TB epidemic and the third pillar of the global End TB strategy emphasize the role of research and innovations in achieving the ambitious target of ending TB by 2035 (3). To this end, the national TB Research Advisory Committee (TRAC) of the Federal Ministry of Health provides the forum and mechanism for coordination and building partnership across various stakeholders to enhance TB research and monitor the progress in TB research in the country. TRAC has published the first national roadmap for TB operational research in 2013. The committee has also revised the roadmap to make it comprehensive of all type of TB researches “The National Plan for TB Research in Ethiopia 2017-2020” and uses as a guidance tool for the TB research community in Ethiopia (4).

Bibliography helps to establish a compilation of research work in TB, TB/HIV and MDR-TB in order to facilitate access and availability of research data and information for

use by policy makers, program planners, researchers, health care services communities, students, and others. The national TB control program will establish the evidence base in prioritizing future research works as well as in designing appropriate policies and interventions.

The literature covered consists of published or unpublished research work on TB or TB/HIV with an exhaustive inclusion of all citations available through the seventeen years study period. It included TB, TB/HIV and MDR-TB records from journal articles, government or non-governmental reports, global reports, graduate thesis or dissertation works, and other related references such a multi-center study that involved Ethiopia. The presentation of the citations is systematically categorized by four themes which is adopted from the national TB research plan of 2017-2020 (4), namely Biomedical and clinical, epidemiological, operational or implementation, and health system research. A total of 1571 references were found, among which 983, 359, 34, and 195 were journal articles, conference presentations, reports/manuals/books, and graduate theses or dissertations, respectively. When one looks at the time trend of TB, TB/HIV and MDR-TB literature from 2001 to 2017, a substantial increase is observed from one year to the next although there is slight upward and downward changes during 2002 to 2006. Similarly, journal articles were the main types of literature represented with substantial increase across the years. Overall, epidemiological researches (635) were the highest number of researches conducted followed by clinical or biomedical researches (538) in the last 17 years under review.

A regular update of this bibliography will improve its content as well as its usefulness. We would like to emphasize that program managers and researchers to generate the appropriate evidence for informed decision making, constantly seek to fill TB/HIV research gaps and ultimately contribute in ending this age-old scourging disease in the country.

REFERENCES

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