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### Assessing progress towards the World Health Organization target of zero catastrophic costs due to tuberculosis by 2035

**Author Block:** Paula P. Jimenez<sup>1</sup>, Sumona Datta<sup>2</sup>, Luz Quevedo Cruz<sup>1</sup>, Matthew J. Saunders<sup>1</sup>, Carlton A. Evans<sup>1</sup>

<sup>1</sup>Innovation For Health and Development, London, United Kingdom, <sup>2</sup>Department of Clinical Sciences, Liverpool School of Tropical Medicine, Liverpool, United Kingdom

#### Abstract:

When the total of household expenditures and lost income due to tuberculosis (TB) exceeds 20% of pre-illness annual household income these costs are termed 'catastrophic' because it is unlikely that it will allow treatment completion to be affordable. The World Health Organization End TB strategy prioritizes the target of zero catastrophic costs. Costs due to TB have been assessed by repeatedly surveying patients throughout treatment about their recent costs; or by asking patients once at the end of treatment to recall all costs due to TB over more than 6 months since their illness began. There is little evidence comparing these strategies. The optimal approach depends on how long patients with TB can reliably remember their costs. To address this important research question, 174 patients newly diagnosed with TB recalled their recent pre-diagnosis costs due to TB to have been USD\$=437 (IQR=95-1450). Then, 6 months later, without being reminded of their previous answers, patients again recalled these pre-diagnosis costs to be median USD\$=660 (IQR=100-1880). Between both assessments, the Spearman correlation coefficient was 0.68, ( $p < 0.001$ ). The costs due to TB during treatment were median USD\$782 (IQR=210-3200). Pre-illness annual household income was median USD\$=15,960 (IQR=10,200-24,000). Thus, if pre-diagnosis costs due to TB were assessed recently at the time of diagnosis then catastrophic costs due to TB affected 34% of households (95% confidence interval, CI=27-42, 60/174). This was not significantly different ( $P=0.5$ ) if pre-diagnosis costs due to TB were assessed later at the time of treatment completion then catastrophic costs due to TB affected 38% of households (95% CI=31-45, 66/174). Thus, patients with TB can usually reliably recall costs due to TB for many months, and catastrophic costs due to TB can be reliably assessed with a questionnaire applied only once at the end of treatment.

**Category (Complete):** Pneumonia, Respiratory Infections and Tuberculosis

**Approach (Complete):**

**Approach:** Other epidemiology

**Presentation Preference (Complete):** Oral

**Keyword (Complete):** Tuberculosis ; catastrophic costs ; Costs

**Disclosures (Complete):**

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: There are no assessments of pre-diagnosis costs due to TB as newly diagnosed patient versus at end of TB treatment

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241 18th Street, South

Suite 501

Arlington, VA 22202

Email: [ngutierrez@astmh.org](mailto:ngutierrez@astmh.org)

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