

Press Release

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South African Institute of Race Relations
The power of ideas

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South Africa's TB incidence rate one of the highest in the world

South Africa has one of the worst tuberculosis (TB) incidence rates in the world, with 993 people out of 100 000 living with the disease. This is according to the latest *South Africa Survey*, published by the South African Institute of Race Relations (IRR) in Johannesburg last week.

The *Survey* is the annual yearbook on all social, economic, and political aspects of South Africa that the IRR has been publishing since 1946.

Out of 35 selected African countries, South Africa has the second highest TB incidence rate after Swaziland, where 1 317 people out of 100 000 are infected with the disease. Egypt has the lowest rate at 17, followed by Mauritius at 21.

When compared to 35 emerging markets, South Africa does the worst by far. The Philippines has the second highest rate of the emerging markets at 270, which is almost four times lower than that of South Africa's. The United Arab Emirates has the lowest rate at 4, followed by Jordan and the Czech Republic, both at 6.

Of all the countries monitored by the IRR, Italy has the lowest TB incidence rate, at 3 per 100 000 people.

TB is closely linked to HIV. According to the World Health Organization (WHO), people who are HIV-positive are 12 to 20 times more likely to contract TB than those living free of the disease. Both Swaziland and South Africa have among the highest HIV prevalence rates in the world.

Ms Lerato Moloji, head of research at the IRR, said, 'The number one cause of death in South Africa, TB causes over 60 000 deaths a year, a figure which is slowly decreasing as several interventions are being put in place to tackle the disease. One such example is the National Strategic Plan on HIV, sexually transmitted infections (STIs), and TB overseen by the South African National AIDS Council (SANAC). One of the objectives of this plan is to develop a single strategy for the treatment and prevention of HIV, STIs, and TB owing primarily to the high HIV and TB co-infection'. Ms Moloji said that since the plan was launched in 2011, all HIV-positive TB patients qualify for antiretroviral therapy regardless of their CD4 count.

Ends
