

# The Case for Integrating Tobacco Control into Infectious Disease Programs

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# The “Syndemic” of Tobacco, HIV and TB

- 37 million people living with HIV, including 15.8 million on ART
  - 70% of HIV infections in Sub-Saharan Africa
- Tobacco use declining in HICs, but burden shifting to LMICs
  - 84% of world’s 1.3 billion smokers live in LMICs
- Both tobacco use and HIV contribute to TB
  - One third of PLHIV are infected with latent TB
  - Tobacco use estimated to account for 25% of global TB mortality
- Existing HIV and TB prevention and treatment guidelines do not include a focus on tobacco use

# Funding Announcement

## ***Tobacco Use and HIV in Low and Middle Income Countries (LMICs)***

First receipt date May 7, 2017

PAR-17-087 [R01]

<https://grants.nih.gov/grants/guide/pa-files/PAR-17-087.html>

PAR-17-086 [R21]

<https://grants.nih.gov/grants/guide/pa-files/PAR-17-086.html>

***National Cancer Institute (NCI) & National Institute on Drug Abuse (NIDA)***

# Goals of Funding Announcement

Encourage research focused on tobacco use and HIV/AIDS in low and middle income countries (LMICs). In particular, applications are encouraged that focus on the development and evaluation of tobacco cessation interventions tailored to HIV positive populations, including those with co-morbidities such as tuberculosis (TB), in low-resource settings.

- Novel, transdisciplinary nature of addressing tobacco use in context of HIV in LMICs
- Bring together investigators from diverse disciplines and research foci to pool their efforts on this syndemic
- Encourage sharing of research strategies and data across disciplines and geographic regions
- Dedicated review group with experience in LMICs and both tobacco and HIV

# Questions