FIND calls on public health leaders for action on diagnostics

Quality, timely diagnosis is an essential enabler of health for all. Early diagnosis has been consistently linked to improved health outcomes and reduced out-of-pocket spending, while disease surveillance provides critical data to inform public health action. However, diagnosis is the weakest link in the care cascade. The capacity to perform basic tests is available in just 1% of primary care clinics in low- and middle-income countries (LMICs) (Leslie, Spiegelman, Zhou, & Kruk, 2017). Worryingly, no diagnostic tests exist for 60% of the pathogens identified by the World Health Organization (WHO) as having the greatest outbreak potential (FIND, 2021). There are also no appropriate tests for half of the top 20 diseases responsible for the most lives lost (FIND, 2021).

As highlighted in the 2021 report of The Lancet Commission on Diagnostics, three major global health priorities—universal health coverage, antimicrobial resistance, and global health security—all require better access to diagnostics (Fleming et al., 2021). The idea that diagnostic tests are central and fundamental to quality and equitable healthcare is under-recognized, leading to underfunding, poor coordination with other disease control efforts, and inadequate resources at all levels (Fleming et al., 2021).

The key learnings from COVID-19 reveal a path to universal health coverage (UHC) and the Sustainable Development Goals for health, and investing in diagnostics will be central to achieving these goals.

Since the onset of the COVID-19 pandemic in January 2020, testing has had a central role in both pandemic control and politics, while the virus has swept through the world. Years of underinvestment in diagnostics research, test kit manufacturing, global laboratory systems, and global surveillance through diagnostics tools meant that both high- and low-income countries found themselves without the tests necessary to contain the spread of SARS-CoV-2. Fragile supply chains and nationalism sparked fierce competition for the procurement of the few tests available early on in the pandemic. In parallel, pandemic-related disruptions to essential health services had dire consequences for both infectious and noncommunicable diseases that might have been mitigated with a more robust and sustainable strategy for testing as a core component of healthcare delivery (Stop TB Partnership, 2021; The Global Fund, 2021).

The COVID-19 pandemic has shown that access to timely, accurate diagnostics is fundamental to effective healthcare. Testing is not just for technical experts; politicians and policy makers need to understand rapid product development, regulatory issues, test kit manufacturing, healthcare capacity, guideline development, and healthcare financing at a level on par with drugs and vaccines. Strong regional and country leadership under COVID-19 has led to enhanced testing and surveillance capacity, but needs further development, collaboration and financing. In particular, the organizations leading this work to enhance diagnostic capacity – including WHO; FIND, the global alliance for diagnostics; and the Global Fund – need sustained financial support.
Longer term, COVID-19 has driven innovation in test development and deployment. New platforms for molecular diagnostics (PCR) have the potential to be as revolutionary for testing as mRNA platforms are for vaccines. New digital technologies, such as artificial intelligence-powered mobile apps and computerized cough analysis to differentiate between COVID-19 and tuberculosis (TB) are continuing to improve testing globally. Connectivity is paving the way for healthcare services to be accessed directly through mobile and digital apps in the farthest reaches of the world, and the rise in wearable technology and at-home tests is transforming self-monitoring and self-testing approaches (FIND, 2021).

Alongside this great progress, however, is the hard truth that the COVID-19 pandemic has exposed huge inequities in testing – of more than 4.7 billion COVID-19 tests administered globally since the beginning of the pandemic, only 0.4% have been administered in low-income countries. Currently, high-income countries use COVID tests at 10–100 times the rate of LMICs and low-income countries, a massive inequity that is growing, not shrinking, in 2022 (FIND, 2022).

Addressing shortfalls in diagnostic testing must be an urgent priority. Deficiencies in testing affect not only people’s lives, but communities and economies, as COVID-19 clearly showed. Strong global leadership and political will is needed to accelerate change and lead the world towards a better future. 

Recalling the recommendations of The Lancet Commission on Diagnostics, at the 75th World Health Assembly, FIND calls on Member States, taking into account their national circumstances, to:

- establish a national diagnostics strategy as part of their National Health Plan;
- develop a national Essential Diagnostics List, adapting the WHO list to local context and plans to fund gaps in access to essential diagnostics;
- make key essential diagnostics available at the primary healthcare level, and to include essential diagnostics in UHC and other community insurance benefits packages;
- invest in developing an appropriate workforce at all levels of the health system, with the skilling and upgrading needed to support advances in diagnostics;
- commit to regulatory frameworks for diagnostics; and
- commit resources to invest in research and product development and expanding manufacturing capacity for diagnostics and surveillance.

These actions, together with resourcing, political will and strong collaboration networks will help us achieve UHC and stronger global health security.
References


