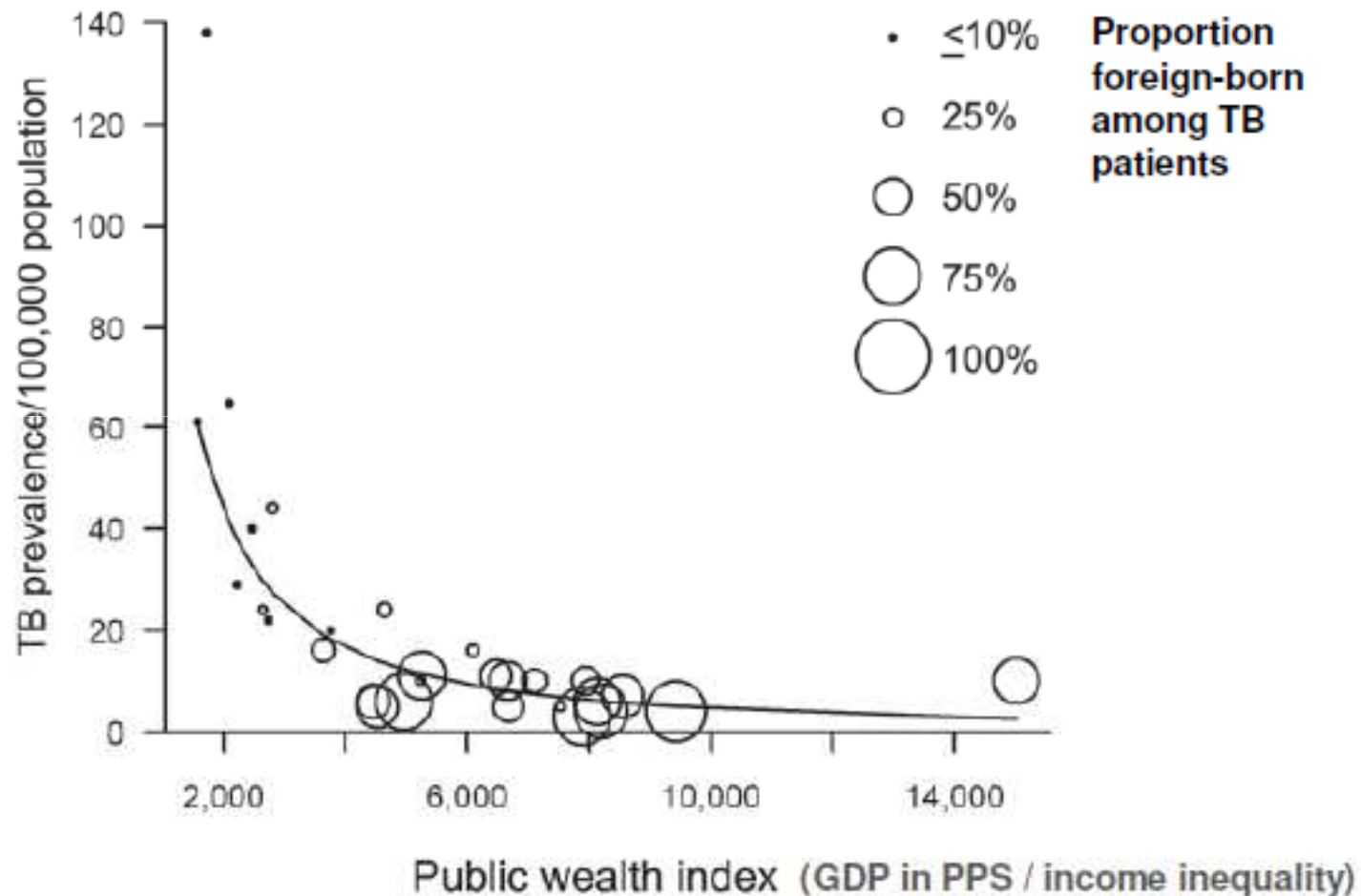


TB prevalence and public wealth; EU, 2006



Tuberculosis control and elimination 2010–50: cure, care, and social development

Lancet 2010; 375: 1814–29

Knut Lönnroth, Kenneth G Castro, Jeremiah Muhwa Chakaya, Lakhbir Singh Chauhan, Katherine Floyd, Philippe Glaziou, Mario C Raviglione

The way forward: action on 4 fronts

1. Continued scale-up of early diagnosis and treatment in line with the Stop TB Strategy
2. Development and enforcement of bold health system policies
3. Establishment of links with the broader development agenda (socioeconomic factors)
4. Promotion and intensification of research

Some future barriers to TB Control

- Poverty, Housing, Social disruption
- The under-diagnosis of TB
- Perceived complexity of the public health systems we are promoting
- Natural progression of resistance in drugs
- The benefits and risks of having joint project eg malaria, smoking cessation, HIV-TB

**Political Leadership &
Massive New Resources Are
Needed to Stop TB**

RAPID COMMUNICATIONS

Suspected transmission of tuberculosis in a maternity ward from a smear-positive nurse: preliminary results of clinical evaluations and testing of neonates potentially exposed, Rome, Italy, 1 January to 28 July 2011

Euro Surveill. 2011;16(40):pii=19984. Article published on 6 October 2011

- tuberculosis transmission from a nurse to a newborn assessed in late July 2011.
- All exposed neonates born between January and July 2011 were clinically evaluated and tested by QuantiFERON TB gold in-tube;
- Newborns testing positive were referred for prophylaxis.
- Of 1,340 newborns, 118 (9%) tested positive and no other active cases of TB were found.



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ORVM SPORT CENTER S.S.D.Srl Sei un PROFESSIONISTA? Vieni a provare GRATIS il Circolo di Roma!

«Tbc, infermiera positiva nel 2004 Il Gemelli era stato informato»

l'ospedale: pensavamo che fosse soltanto
una reazione al vaccino



di Valentina Errante

ROMA - Era già risultata positiva al test sulla tbc tra il 2004 e il 2005, l'infermiera del Policlinico Gemelli che il 28 luglio scorso ha scoperto di essere affetta da tubercolosi polmonare e avrebbe dato origine al contagio nel reparto di Neonatologia. I controlli dell'ospedale sarebbero stati inadeguati.

Ieri la donna è stata ascoltata per oltre due ore dal procuratore aggiunto Leonardo Frisani e dal pm Alberto Pioletti, titolari del fascicolo sulla diffusione del virus in corsia. Attraverso la struttura protetta dell'Ospedale Spallanzani, dove è ancora ricoverata, ha risposto alle



Abbattimento liste d'attesa



per RISONANZA
MAGNETICA

panorama»am



13:30 02/09/2011 » HEALTH

TB scandal in Italy: 80 newborns infected

About 80 newborn babies have been infected with tuberculosis (TB) in one of Italy's largest and most modern hospitals, Russian Ria Novosti quotes local media as saying.

According to official information, 79 babies born in the Gemelli Hospital in Rome have recently tested positive for tuberculosis. However, an influential Italian consumers' rights organization, Codacons, says the figure could be twice as high.

The scandal broke out in mid-August when it was announced that one of the nurses at the hospital's neonatal department tested positive for TB, and all the children born from March to July are under the threat of infection.



COMMENTS

Bako Sahakyan had an interview with Panorama.am in connection with the 20th jubilee of independence of NKR and negotiations over the reconciliation of conflict

It's quite obvious that former status or former borders cannot be returned

Today news

Ինտերնետ և ավելին

«USU կրնեկտ» սակագնային պլաններ սկսած ամսական 3500 դրամից

«USU կրնեկտ» մոդեմ անվճար մեկ տարով բաժանորդագրելու դեպքում

CALENDAR

< 2011 >> **September** >

S	M	T	W	T	F	S

RAPID COMMUNICATIONS

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Euro Surveill. 2011;16(40):pii=19984. Article published on 6 October 2011

Results of QuantiFERON TB gold by month of birth in the cohort of children potentially exposed to a nurse with active tuberculosis, Rome, Italy, January–July 2011 (n=1,340)

Month of birth in 2011	QuantiFERON TB gold	
	Total tested	Positive
	N ^a	N (%)
January	122	15 (12)
February	170	20 (12)
March	209	21 (10) ^b
April	214	13 (6)
May	224	15 (7)
June	223	15 (7)
July	174	19 (11)
Unknown	4	0 (0)
Total	1,340	118 (9)

Fermato malato di Tbc A rischio alcuni poliziotti

Il sindacato del Coisp chiede interventi e chiarimenti

Annarita Carbone

■ GAETA È allarme tubercolosi, non solo nella Capitale ma anche in provincia di Latina. A Gaeta in modo particolare dove, nei giorni scorsi, alcuni agenti di polizia, della capitaneria di porto e della guardia costiera, sarebbero entrati a contatto con un cittadino di origine marocchina rivelatosi, in un secondo momento, affetto da tubercolosi.

Ignari della malattia dell'uomo, i militari di servizio avrebbero espletato tutte le azioni di routine previste durante i controlli effettuati sulle spiagge ed è du-

rante tali controlli che 6 venditori ambulanti marocchini furono fermati ed accompagnati presso il commissariato di Polizia perché non in regola con la normativa sugli stranieri. Gli agenti sarebbero stati a stretto contatto con loro sia sulle spiagge, sia in automobile, sia nelle sale d'aspetto degli Uffici di Polizia.

Questo succedeva il 18 agosto scorso. Il giorno successivo, la Questura di Latina riferiva che uno dei due stranieri trasferiti presso il C.I.E. di Torino, risultava affetto da Tbc. La comunicazione, emessa in maniera informale dalla Questura al fine di accorciare al massimo i tempi di comunicazione, ha immediatamente suscitato grande apprensione. Il Coisp, sinda-

Operazione

Sei marocchini

vennero trattenuti

negli uffici di Formia

cato di polizia, chiede al più presto che vengano effettuati i dovuti controlli sui luoghi e sulle persone interessate dall'evento: «La Segreteria nazionale chiede, visto il ripetersi di episodi analoghi in tutto il territorio, che siano emanate a livello centrale le procedure standard e adottati protocolli di intervento per tutto il personale della Poli-

zia di Stato che si trovi a contatto con agenti patogeni di malattie infettive. Vanno inoltre forniti i necessari presidi sanitari». «L'allarmismo che si sta diffondendo in questi giorni è esagerato - spiega il dottor Vincenzo Viola, medico chirurgo dell'ospedale di Fondi. Con l'arrivo di innumerevoli stranieri clandestini, la malattia sta tornando a presentarsi. Il contagio avviene sì per via aerea ma deve esserci un contatto molto stretto e diretto tra le goccioline di saliva emesse con la tosse e la persona sana». Di conseguenza, si ai controlli ma va evitato il panico».

1

Patologia

Tra gli stranieri fermati è stata riscontrata la presenza del batterio

19

Agosto

È la data in cui la polizia ha eseguito il servizio leri il caso alla ribalta

Should Individuals Who Are Tuberculin Skin Test Negative and Positive to RD1-IFN- γ Assay Receive Preventive Therapy?

Should Individuals Who Are Tuberculin Skin Test Negative and Positive to RD1-IFN- γ Assay Receive Preventive Therapy?

Available data on the benefit of treatment of latent tuberculosis infection are based on trials using TST-positive individuals

It remains to be demonstrated that a similar benefit could be found in TST-negative individuals who are positive to IFN- tests.

Before routine administration of preventive therapy to these individuals is implemented, more natural history data, and ideally a clinical trial comparing the incidence of tuberculosis among those who are treated and those who are not, are needed.

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Is It Time to Replace the Tuberculin Skin Test With a Blood Test?

- **Philip A. LoBue & Kenneth G. Castro,**

Division of Tuberculosis Elimination,
National Center for HIV, Viral Hepatitis,
STD, and TB Prevention, Centers for
Disease Control and Prevention, Atlanta,
Georgia.

Is It Time to Replace the Tuberculin Skin Test With a Blood Test?

Philip A. LoBue, MD

Kenneth G. Castro, MD

- IGRAs—release assays offer several practical and theoretical advantages over TST.
- -require only 1 patient visit as opposed to 2 for TST (1 visit for placement and 1 visit for reading 48-72 hours later)

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- IGRAs use an objective measurement of interferon production as opposed to human measurement of induration for TST
- use peptides simulating specific *M tuberculosis* antigens whereas TST uses purified protein derivative.

Is It Time to Replace the Tuberculin Skin Test With a Blood Test?

Philip A. LoBue, MD

Kenneth G. Castro, MD

- **Research on performance of IGRAs, largely in comparison with TST:**
 - 2 important methodological limitations.
- First, there is no gold standard for diagnosing LTBI.
- (Sensitivity measured using persons with TB disease, and specificity has been measured using persons with no identifiable TB risk factors as surrogate standards).

Is It Time to Replace the Tuberculin Skin Test With a Blood Test?

Philip A. LoBue, MD

Kenneth G. Castro, MD

- **Research on performance of IGRAs, largely in comparison with TST:**
 - 2 important methodological limitations.
- Second, studies of certain populations (eg, young children, immunocompromised persons) have been confined to relatively small sample sizes with inadequate statistical power.

Is It Time to Replace the Tuberculin Skin Test With a Blood Test?

Philip A. LoBue, MD

Kenneth G. Castro, MD

- In general IGRAs appear to be no less sensitive and specific than TST and more specific than TST in persons vaccinated with BCG.
- The most important property of diagnostic tests for LTBI is predicting which patients will eventually progress to TB disease.

Is It Time to Replace the Tuberculin Skin Test With a Blood Test?

Philip A. LoBue, MD

Kenneth G. Castro, MD

- In this regard, TST performs poorly, with only 5% to 10% of persons with positive TST results developing TB disease.
- Evaluating the ability of IGRAs to predict development of TB disease has been difficult.

Is It Time to Replace the Tuberculin Skin Test With a Blood Test?

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- Data for TST collected in large prospective studies starting in the 1950s. It is not possible to replicate such studies for IGRAs because of the ethical necessity to offer LTBI treatment to persons with positive test results.
- Therefore, prospective IGRA studies have often focused on persons refusing or not completing LTBI treatment, which limits sample size and statistical power and introduces potential bias.

Is It Time to Replace the Tuberculin Skin Test With a Blood Test?

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Kenneth G. Castro, MD

- Although no study or combination of studies has been definitive, the available data suggest IGRAs are at least as good as TST in predicting future incident TB and may be slightly better.
- Neither IGRAs nor the TST have high accuracy for the prediction of active tuberculosis, although use of IGRAs in some populations might reduce the number of people considered for preventive treatment.

Is It Time to Replace the Tuberculin Skin Test With a Blood Test?

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Kenneth G. Castro, MD

- Until more predictive biomarkers are identified, existing tests for latent tuberculosis infection should be chosen on the basis of relative specificity in different populations, logistics, cost, and patients' preferences rather than on predictive ability alone.

Is It Time to Replace the Tuberculin Skin Test With a Blood Test?

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- The testing materials for IGRAs are substantially more costly than for TST. Even including labor costs, the cost of a single IGRA may be 3 times as high as the cost of a TST.
- A number of cost-effectiveness studies have been performed in different populations and, not surprisingly, the results are inconsistent.

Is It Time to Replace the Tuberculin Skin Test With a Blood Test?

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- A more unexpected finding has been some reports of unusually **high rates of initial positive IGRA results and high IGRA conversion rates** (ie, from a negative test to a positive test) among health care workers who undergo periodic testing in relatively low TB risk settings.

«BISOGNA RASSICURARE E CHIARIRE»

Tbc, anche Fazio positivo al test

Il ministro: «Mi rivolgo ai genitori dei bimbi contagiati: Essere positivi non vuol dire avere la malattia»



Ferruccio Fazio

«L'idea è stata mia. Volevo trovare un modo per comunicare e far capire che essere positivi al batterio della tubercolosi non significa avere la malattia. Il mio gesto è stato un messaggio ai genitori dei bambini contagiati al policlinico Gemelli. State tranquilli».

Il ministro della Salute Ferruccio Fazio dieci giorni fa si è sottoposto al test per la Tbc, il Quantiferon. Una trovata pubblicitaria, più o meno l'equivalente di quando all'epoca del disastro nucleare di Fukushima il ministro ha mangiato in diretta

il sushi per far comprendere l'inesistenza del rischio di tossicità legato al consumo di alimenti tipici della cucina giapponese, a cominciare dal pesce. Ma anche Fazio è risultato positivo al test. La notizia della positività è stata diffusa nel corso del convegno dell'associazione Codacons da Gianni

Pezzo, epidemiologo dell'Istituto Superiore di Sanità.

ine della pagina.



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Fai un preventivo



Dolori articolari? Affezioni alle vie respiratorie?

Is It Time to Replace the Tuberculin Skin Test With a Blood Test?

Philip A. LoBue, MD

Kenneth G. Castro, MD

- A multicenter CDC study with additional testing (either TST or repeat IGRA), suggested that these **unexpected initial positive test results and conversions** have usually been determined to be **false-positive results** related to laboratory error and inherent assay variability.

Is It Time to Replace the Tuberculin Skin Test With a Blood Test?

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**Therefore, TST has
not outlived its
usefulness.**

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TB can be eradicated?

- Recent mathematical TB transmission modeling has shown that substantial improvements in addressing LTBI will be needed to eliminate TB before the 22nd century