



**In light of the latest outbreak of Tuberculosis (TB) amongst school children in Cork the Irish Thoracic Society (ITS) has today, 22<sup>nd</sup> August, called for the implementation of a number of principles that are central to addressing the continued challenge of the disease to public health in Ireland.**

**TB is a preventable disease – prevention is key.** This is achieved through screening high risk groups and treating them for latent TB before active infection develops. Establishing a vigorous national programme to screen for and treat latent TB in high risk groups will be the **most effective** way of reducing the incidence of this disease in Ireland.

**Educate healthcare professionals and members of the public to recognise the symptoms of TB.** Routine testing for TB should be encouraged in patients with persistent cough with sputum or other symptoms of TB, and patients should be encouraged to see a health care professional if they experience such symptoms. Microbiology laboratories should be funded to test for TB on a routine basis and to enhance TB diagnostic facilities.

**Ensure patients follow and complete treatment to avoid recurrence and spread of TB with Directly Observed Therapy (DOT).** High rates of treatment failure are a serious issue in the management of TB and can be avoided through DOT, where patients are assigned a healthcare professional to monitor their treatment and ensure compliance with medication. Ireland falls short of World Health Organisation recommendations with regard to the routine practise of DOT.

**Control the spread of multi-drug resistant TB (MDR-TB).** This is a form of TB that fails to respond to standard first-line drugs and is therefore difficult and expensive to treat. Although cases of MDR-TB have been few in Ireland, it is an increasing threat worldwide and is likely to become more common in Ireland.

“As the current cluster of cases demonstrates, TB has not gone away. Ireland has seen a rise in case numbers in recent years and the contagious nature of the disease means that communities are vulnerable if the proper safeguards are not in place. While it is important that there is a universal national policy for BCG vaccination, vaccination in itself does not ensure that a person will never contract TB. Establishing a vigorous programme to screen for and treat latent TB will be the most effective way of reducing the incidence of TB in Ireland, will reap long-term public health and cost gains and should be introduced without delay. Furthermore, patients with persistent cough with sputum should be encouraged to present to a health care professionals and health care professionals should be encouraged to routinely test for TB in such cases.” Said Dr Terry O'Connor, President of the Irish Thoracic Society and respiratory physician in Mercy University Hospital, Cork.

Ends

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### **Facts about TB**

1. Tuberculosis (TB) is contagious and spreads through the air. A person with infectious TB can expel TB germs into the air when they cough or sneeze. People in the surrounding area can then inhale these TB germs. Each person with active infectious TB infects on average 10 to 15 people a year.
2. In 2007, 480 cases of TB (11.3 cases per 100,000 population) were notified to the Health Protection Surveillance Centre (HSPC). This marked an increase on the rates reported between 2000 and 2005, which ranged from 9.7 to 10.6 per 100,000 population.<sup>1</sup> This recent increase in the incidence of TB follows more than half a century of declining TB rates, from almost 7000 cases in the early 1950s to approximately 400 at the turn of the millennium.
3. More than two billion people, equal to one third of the world's total population, have latent TB, a dormant form of the disease. One in every 10 of those people will become sick with active TB in his or her lifetime. People with HIV infection are at a much greater risk.<sup>3</sup>
4. Worldwide, a total of 1.8 million people died from TB in 2008 (including 500,000 people with HIV). The vast majority of TB deaths are in the developing world, with more than half occurring in Asia.<sup>3</sup>
5. Multidrug-resistant TB (MDR-TB) is a form of TB that does not respond to the standard treatments using first-line drugs. There were an estimated 500,000 new MDR-TB cases in 2007 with three countries accounting for 56% of all cases globally: China, India and the Russian Federation.<sup>3</sup>
6. Extensively drug-resistant TB (XDR-TB) occurs when resistance to second-line drugs develops. It is extremely difficult to treat and cases have been confirmed in 57 countries. We have had one case of XDR-TB in Ireland.

### **References:**

1. Report on the Epidemiology of TB in Ireland, 2006, The Health Protection Surveillance Centre – [www.hpsc.ie](http://www.hpsc.ie)
2. Central Statistics Office, Report on Vital Statistics, 2006  
[www.cso.ie/releasespublications/annual\\_report\\_vit\\_stats\\_2006.htm](http://www.cso.ie/releasespublications/annual_report_vit_stats_2006.htm)
3. World Health Organisation (WHO)  
[www.who.int/tb/publications/2009/tbfactsheet\\_2009update\\_one\\_page.pdf](http://www.who.int/tb/publications/2009/tbfactsheet_2009update_one_page.pdf)