

10.10 Delivering Effective Treatment for Latent Tuberculosis Infection Using A Hybrid Care Model

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Background: Latent tuberculosis infection (LTBI) evaluation and management is a common reason for referral to the TB service. Prior to the pandemic all patient encounters occurred in person. Since mid-2020 we have used a hybrid model of care with the first evaluation and decisions regarding therapy occurring in-person and subsequent clinic visits performed virtually.

Methods: We evaluated our LTBI service between 07/2020-12/2022, examining the rate of therapy completion, adverse events and number of patients lost to follow-up, to assess the effectiveness of this hybrid model.

Results: Eighty-three patients were included. A majority, (n=67, 81%), attended for all required blood testing and were reached for all virtual clinic encounters (n=79, 95%). The overall treatment completion rate was 92%. Among those who failed to complete treatment, the mean age was 50 years with the majority (75%) referred by the occupational health department. Those requiring LTBI therapy prior to commencement of biologic therapy were most compliant with LTBI therapy with a treatment completion rate of 100% versus 81% amongst those undergoing LTBI therapy for other reasons.

Conclusion: This data suggests that a hybrid care model is an effective way to treat LTBI, with potential benefits for patients and staff versus traditional in-person care.

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