

# Targeted Testing for Latent Tuberculosis Infection

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# Introduction

## Purpose

Use this section to understand and follow national and Montana guidelines to conduct targeted testing to screen for latent tuberculosis infection (LTBI).

In the 2005 guideline “Controlling Tuberculosis in the United States: Recommendations from the American Thoracic Society, CDC, and the Infectious Diseases Society of America,” one of the recommended strategies to achieve the goal of reduction of tuberculosis (TB) morbidity and mortality is the identification of persons with LTBI at risk for progression to TB disease, and treatment of those persons with an effective drug regimen.<sup>1</sup>



For information on treatment, refer to the Treatment of Tuberculosis Disease and Treatment of Latent Tuberculosis Infection sections.

Reducing LTBI in high-risk populations is an important strategy to control TB. With an estimated 9.5–14.7 million persons with LTBI in the United States, continued progress toward eliminating TB in the United States and reducing TB among foreign-born persons requires effective strategies to meet this challenge.<sup>2</sup> Targeted testing for LTBI is a strategic component of TB control that identifies persons at high risk for developing TB who would benefit by treatment of LTBI, if detected. Persons with increased risk for developing TB include those who have had recent infection with *Mycobacterium tuberculosis* and those who have clinical conditions that are associated with an increased risk for progression of LTBI to active TB.<sup>3</sup>

## Policy

In Montana:

- Targeted testing for LTBI should be conducted only among persons in groups with identified risk factors for LTBI and/or progression to TB disease.
- For a list of groups at high risk, refer to Table 1: **Persons at High Risk for Tuberculosis Infection and Progression to Tuberculosis Disease.**



For roles and responsibilities, refer to the “Roles, Responsibilities, and Contact Information” topic in the Introduction.

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## High-Risk Groups

Certain factors identify persons at high risk for tuberculosis (TB) infection and/or for progression to TB disease. Persons in the high-risk groups listed in Table 1: **Persons at High Risk for Tuberculosis Infection and Progression to Tuberculosis Disease** are candidates for tuberculin skin testing in Montana.

Persons with risk factors from both columns may be at much higher risk than those with risk factors in only one column. For example, an individual born in a high-TB-prevalence country with HIV infection is at much higher risk of having active TB than a US-born individual with HIV infection.

TABLE 1: PERSONS AT HIGH RISK FOR TUBERCULOSIS INFECTION AND PROGRESSION TO TUBERCULOSIS DISEASE<sup>4</sup>

For Tuberculosis Infection	For Progression to Tuberculosis Disease <sup>5</sup>
<ul style="list-style-type: none"> <li>▪ High-priority contacts such as housemates or coworkers, or contacts of persons who have smear-positive pulmonary or laryngeal tuberculosis (TB)</li> <li>▪ Infants, children, and adolescents exposed to adults in high-risk categories</li> <li>▪ Recent immigrants (primarily &lt;5 years) from countries with high incidence of TB (Asian, African, Latin American, and Eastern European countries have TB rates 5–30 times higher than US rates, and an increasing percentage of TB cases in the United States are occurring among immigrants from those countries)</li> <li>▪ Residents and employees of high-risk congregate settings (e.g., correctional institutions, nursing homes and other long-term care facilities providing care to high-risk residents and clients, and homeless shelters)</li> <li>▪ Some healthcare workers who serve high-risk clients, especially emergency departments, staff involved in high-risk procedures, and laboratories manipulating TB cultures</li> <li>▪ Some high-risk racial or ethnic minority populations, defined locally as having an increased prevalence of TB</li> <li>▪ Some medically underserved, low-income populations as defined locally (e.g., homeless, transient populations)</li> <li>▪ Persons who inject illicit drugs; any other locally identified high-risk substance abuse users</li> </ul>	<ul style="list-style-type: none"> <li>▪ Persons with HIV infection</li> <li>▪ Infants and children aged &lt;5 years</li> <li>▪ Persons infected with <i>Mycobacterium tuberculosis</i> within the previous 2 years</li> <li>▪ Persons with a history of untreated or inadequately treated TB disease</li> <li>▪ Persons with radiographic findings consistent with previous TB disease</li> <li>▪ Persons who use alcohol or illegal drugs (such as injection drugs or crack cocaine)</li> <li>▪ Persons with any of the following clinical conditions or other immunocompromising conditions:               <ul style="list-style-type: none"> <li>• Silicosis</li> <li>• Diabetes mellitus</li> <li>• End-stage renal disease (ESRD)/chronic renal failure, hemodialysis</li> <li>• Some hematologic disorders (e.g., leukemias and lymphomas)</li> <li>• Other malignancies (e.g., carcinoma of head, neck, or lung)</li> <li>• Body weight <math>\geq 10\%</math> below ideal body weight</li> <li>• Prolonged corticosteroid use</li> <li>• Use of other immunosuppressive treatments (e.g., prednisone or tumor necrosis factor-alpha [TNF-<math>\alpha</math>] antagonists)</li> <li>• Organ transplantation</li> <li>• Gastrectomy</li> <li>• Chronic malabsorption syndromes</li> <li>• Jejunioileal bypass</li> </ul> </li> </ul>

Source: Adapted from: CDC. Guidelines for preventing the transmission of *Mycobacterium tuberculosis* in health-care settings, 2005. *MMWR* 2005;54(No. RR-17):4–5; CDC. Targeted tuberculin testing and treatment of latent tuberculosis infection. *MMWR* 2000;49(No. RR-6):7–9.

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## When to Conduct Targeted Testing

Targeted testing programs should be conducted only among groups at high risk, and testing should be discouraged for groups at low risk.<sup>6</sup> High-risk groups include persons with increased risk for developing tuberculosis (TB) and those who have clinical conditions that are associated with an increased risk for progress of latent TB infection (LTBI) to TB disease.



Factors that identify persons at high risk of LTBI infection and/or progressing to TB disease are listed in Table 1: **Persons at High Risk for Tuberculosis Infection and Progression to Tuberculosis Disease.**



Evaluate high-risk patients for LTBI as specified in the Diagnosis of Latent Tuberculosis Infection section.



Offer treatment of LTBI to infected persons, irrespective of age, who are considered to be at high risk for developing active TB.<sup>7</sup> See the Treatment of Latent Tuberculosis Infection section.

## Approaches to Increasing Targeted Testing and Treatment of Latent Tuberculosis Infection

The Centers for Disease Control and Prevention (CDC) describes two approaches to increasing targeted testing and treatment of LTBI. To plan and implement programs for targeted testing and treatment of LTBI, follow the recommended approaches outlined below.<sup>8</sup>

One approach is to promote clinic-based testing of persons who are under a clinician's care for a medical condition (e.g., human immunodeficiency virus [HIV] infection or diabetes mellitus) that also confers a risk for acquiring TB. This approach depends on a person's risk profile for TB.<sup>9</sup>

The other approach is to establish specific programs that target a subpopulation of persons who have a high prevalence of LTBI or who are at high risk for acquiring TB disease if they have LTBI, or both. This approach requires identifying the subpopulations or areas with high TB risk through epidemiologic analysis and profiling.<sup>10</sup>



For information on the system for prioritizing persons for targeted testing, refer to "Controlling Tuberculosis in the United States: Recommendations from the American Thoracic Society, CDC, and the Infectious Diseases Society of America" (*MMWR* 2005;54[No. RR-12]:40–42).



For assistance in planning targeted testing, contact the Montana TB Program at 406-444-0275.

## Screening for Latent Tuberculosis Infection in Facilities

Screening for LTBI should be conducted based upon each facility's risk for transmission of *Mycobacterium tuberculosis* (i.e., low risk, medium risk, or potential for ongoing transmission),<sup>11</sup> as determined in its TB risk assessment (both initial baseline assessment and periodic reassessments).



Risk assessment protocols and elements are outlined in the CDC's "Guidelines for Preventing the Transmission of *Mycobacterium tuberculosis* in Health-care Settings, 2005" (*MMWR* 2005;54[No. RR-17]).



Infection control planning for facilities will be discussed in the Infection Control section of this manual. This section will be available in the Spring of 2007. Check the Montana Tuberculosis Program Manual Web page.

Screening determines if a person should be evaluated for LTBI or TB disease by asking questions to gather information about whether the person

- has signs or symptoms of TB disease;
- belongs to a group at high risk for LTBI or (if infected) for progression to TB disease; or
- has a prior positive tuberculin skin test (TST).

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## References

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- <sup>1</sup> ATS, CDC, IDSA. Controlling tuberculosis in the United States: recommendations from the American Thoracic Society, CDC, and the Infectious Diseases Society of America. *MMWR* 2005;54(No. RR-12):15.
- <sup>2</sup> ATS, CDC, IDSA. Controlling tuberculosis in the United States: recommendations from the American Thoracic Society, CDC, and the Infectious Diseases Society of America. *MMWR* 2005;54(No. RR-12):40.
- <sup>3</sup> CDC. Targeted tuberculin testing and treatment of latent tuberculosis infection. *MMWR* 2000;49(No. RR-6):1.
- <sup>4</sup> CDC. Guidelines for preventing the transmission of *Mycobacterium tuberculosis* in health-care settings, 2005. *MMWR* 2005;54(No. RR-17):4–5; CDC. Targeted tuberculin testing and treatment of latent tuberculosis infection. *MMWR* 2000;49(No. RR-6):7–9, 22.
- <sup>5</sup> CDC. Targeted tuberculin testing and treatment of latent tuberculosis infection. *MMWR* 2000;49(No. RR-6):8–9.
- <sup>6</sup> CDC. Targeted tuberculin testing and treatment of latent tuberculosis infection. *MMWR* 2000;49(No. RR-6):1–2.
- <sup>7</sup> CDC. Targeted tuberculin testing and treatment of latent tuberculosis infection. *MMWR* 2000;49(No. RR-6):1.
- <sup>8</sup> ATS, CDC, IDSA. Controlling tuberculosis in the United States: recommendations from the American Thoracic Society, CDC, and the Infectious Diseases Society of America. *MMWR* 2005;54(No. RR-12):40.
- <sup>9</sup> ATS, CDC, IDSA. Controlling tuberculosis in the United States: recommendations from the American Thoracic Society, CDC, and the Infectious Diseases Society of America. *MMWR* 2005;54(No. RR-12):40.
- <sup>10</sup> ATS, CDC, IDSA. Controlling tuberculosis in the United States: recommendations from the American Thoracic Society, CDC, and the Infectious Diseases Society of America. *MMWR* 2005;54(No. RR-12):40.
- <sup>11</sup> CDC. Guidelines for preventing the transmission of *Mycobacterium tuberculosis* in health-care settings, 2005. *MMWR* 2005;54(No. RR-17):10.