

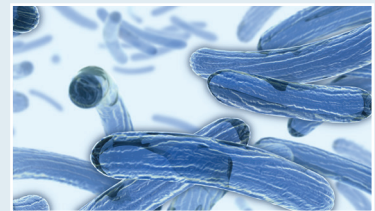


# Tuberculosis in correctional facilities

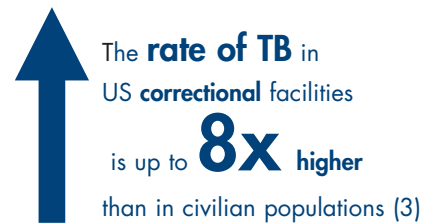
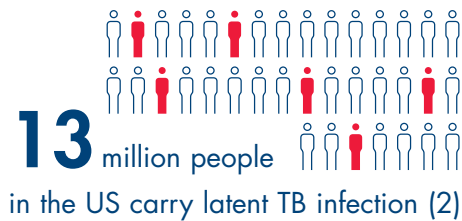
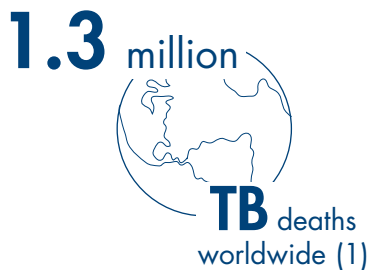
## Keeping inmates, employees and visitors healthy

### About TB

Tuberculosis, or TB, is caused by the bacterial complex *Mycobacterium tuberculosis*. One person with active TB can infect up to 10-15 others through coughing and sneezing. Living and working in close quarters is particularly dangerous as TB is highly contagious.



### By the numbers



## Preventing TB

The best way to prevent TB is to:

- Identify it in its latent form (LTBI)
- Treat it before it poses a threat

**86%**  
of TB cases are from  
reactivation of LTBI

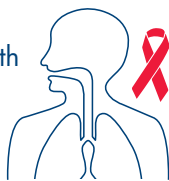


**14%**  
are from recent  
transmission (4)

## Who is affected by TB?

Incarcerated populations have higher rates of risk factors independently associated with TB. These include (4):

Co-infection with  
HIV **5.6%**



Homelessness **4.9%**



Substance/alcohol  
abuse **18.1%**



## Benefits of TB blood tests

Studies have shown that using blood tests like QuantiFERON®-TB Gold Plus in correctional settings may improve identification of LTBI-positive individuals at high risk for TB, results are objectively determined by a lab, whereas the skin test requires a subjective visual assessment. (5).

- The skin test requires two clinic visits and results can be compromised by the BCG vaccine which leads to false-positives and additional medical costs such as unnecessary x-rays (5).
- Compared to the skin test, QFT-Plus has higher sensitivity and improved screening efficiency requiring only one clinic visit (6).
- Current USPSTF guidelines recommend LTBI testing of inmates and recommend IGRA tests as the preferred method for LTBI screening in correctional facilities (7).

Visit [www.QuantiFERON.com/corrections](http://www.QuantiFERON.com/corrections) to learn about implementing accurate LTBI screening at your facility.

### References:

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2. CDC. Latent Tuberculosis Infection: A Guide for Primary Health Care Providers. [www.cdc.gov/tb/publications/lbti/intro.htm](http://www.cdc.gov/tb/publications/lbti/intro.htm)
3. McDaniel C. J. et al. (2017). Tuberculosis trends in California correctional facilities, 1993-2013. *Int J Tuberc Lung Dis.* 21, 922-929.
4. CDC. (2017) Reported Tuberculosis in the United States, 2016.
5. Katyal et al. (2018) IGRA-based screening for latent tuberculosis infection in persons newly incarcerated in New York City jails. *J Correct Health Care* 24, 156-170.
6. Nijhawan, A. et al. (2016) Cost analysis of tuberculin skin test and the QuantiFERON-TB Gold In-tube test for tuberculosis screening in a correctional setting in Dallas, Texas, USA. *BMC Infect. Dis.* 16, 564.
6. Nahid, P. et al. (2016) Official American Thoracic Society/Centers for Disease Control and Prevention/Infectious Diseases Society of America Clinical Practice Guidelines: Treatment of Drug-Susceptible Tuberculosis. *Clin Infect Dis* 1-49.

QuantiFERON-TB Gold Plus (QFT®-Plus) is an in vitro diagnostic aid for detection of *Mycobacterium tuberculosis* infection. QFT-Plus is an indirect test for *M. tuberculosis* infection (including disease) and is intended for use in conjunction with risk assessment, radiography, and other medical and diagnostic evaluations. The performance of the USA format of the QFT-Plus test has not been extensively evaluated with specimens from individuals who have impaired or altered immune functions, such as those who have HIV infection or AIDS. QFT-Plus package inserts, up-to-date licensing information and product-specific disclaimers can be found at [www.QuantiFERON.com](http://www.QuantiFERON.com).

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