



Public Health
England

Protecting and improving the nation's health

TB in Yorkshire and Humber

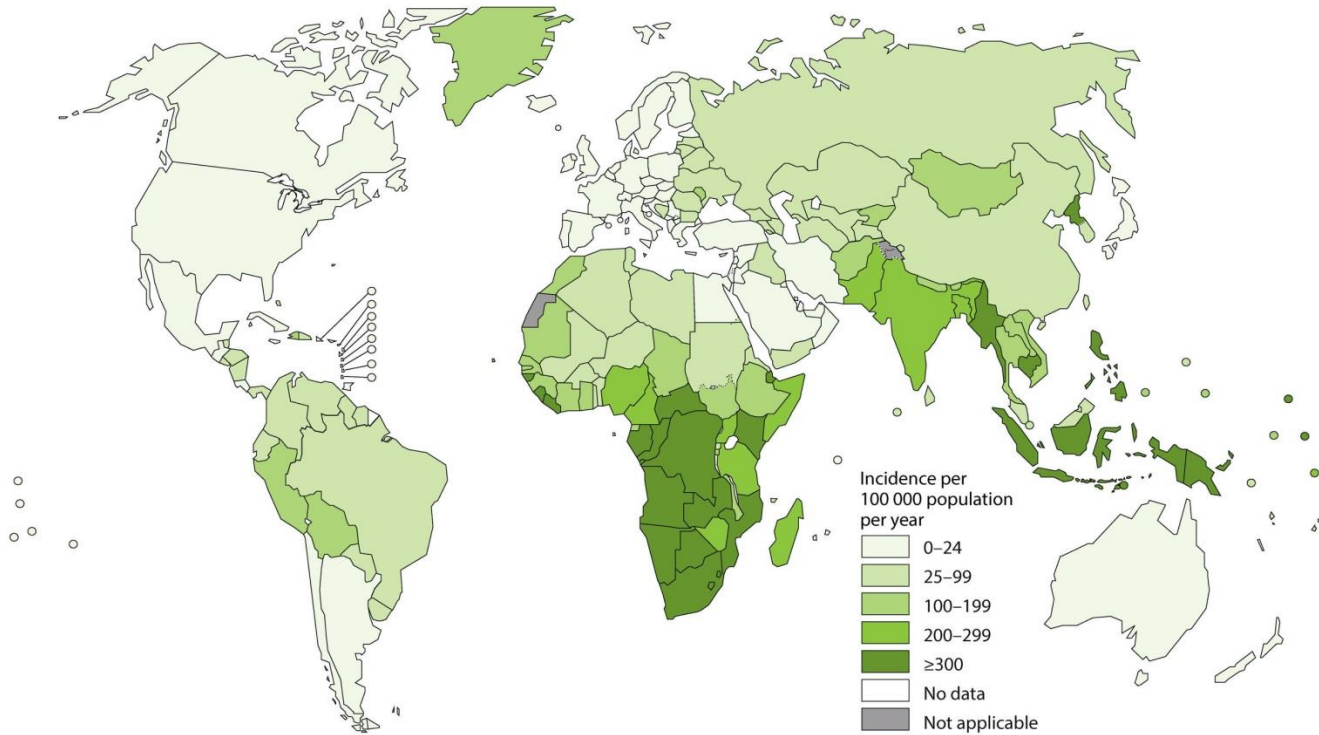
TB disease

- Infectious disease caused by *Mycobacterium tuberculosis*
- Typically pulmonary; other sites include pleura, CNS, bones, miliary
- Droplet transmission
- Cough, haemoptysis, fatigue, fever, night sweats, weight loss
- **Untreated, approximately 70% mortality within 10 years**
- **Untreated, infects 10-15 other people in a year**



TB is a global health problem

Estimated TB incidence rates, 2016



The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement.

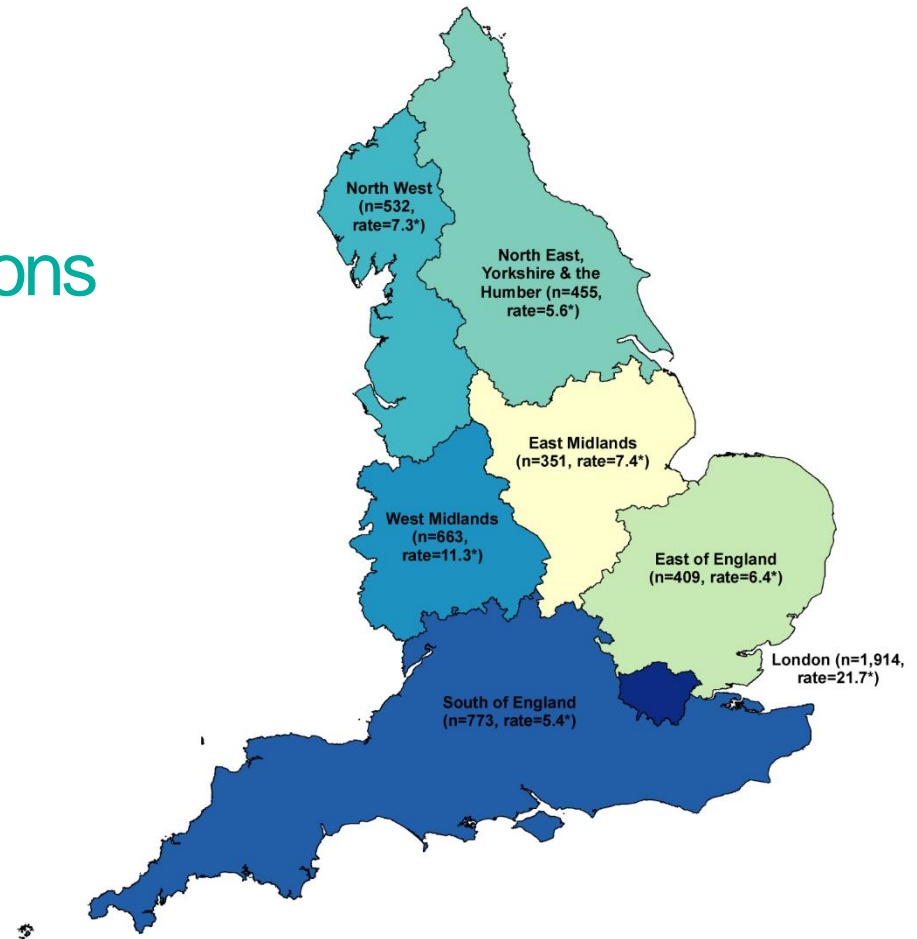
Data Source: *Global Tuberculosis Report 2017*. WHO, 2017.

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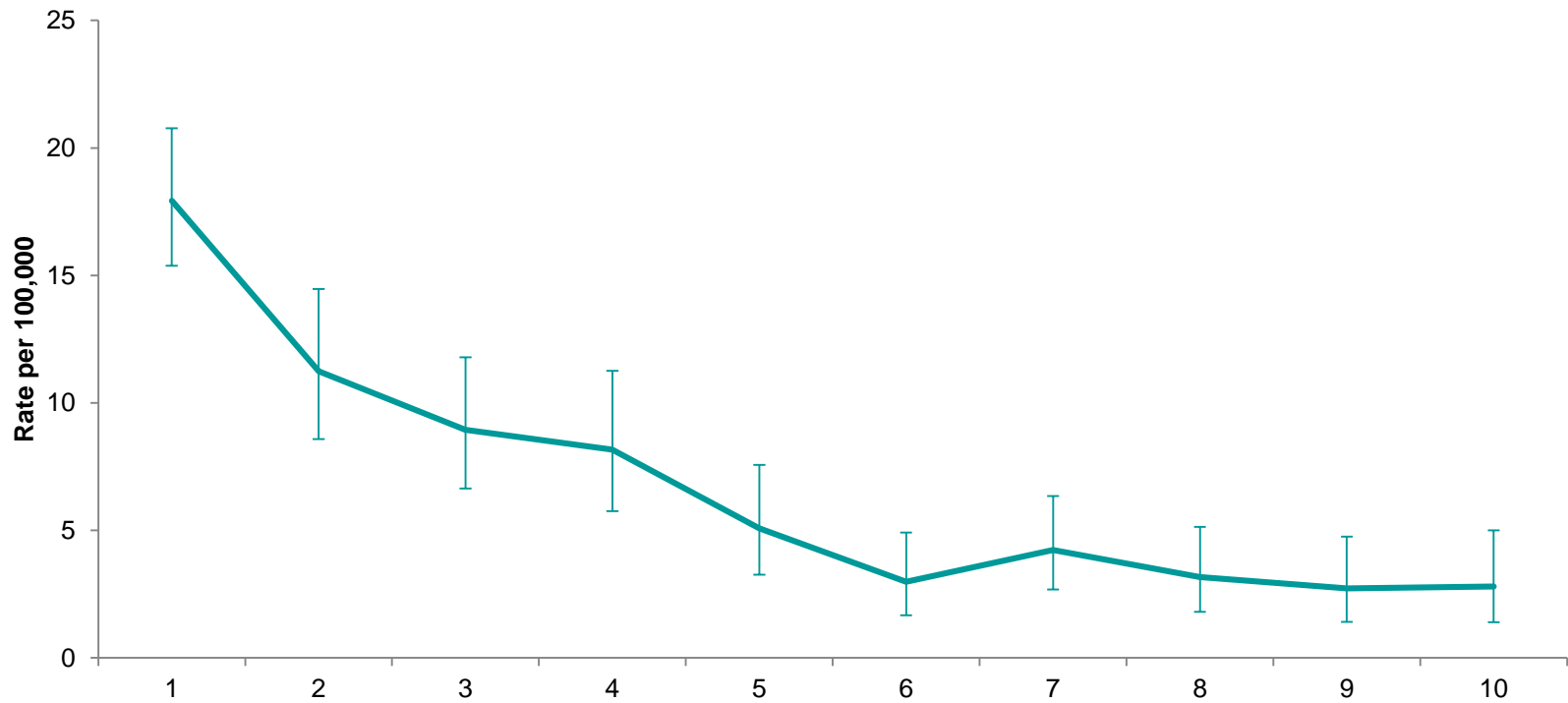
The Yorkshire and Humber and North East TB Control Board

Number of TB notifications
and rates by TB control
board, England, 2017



Deprivation

TB case rate by deprivation, 2016



Records review in a LA area

Why?

2016: review of 8 patients who had accessed specialist TB service

2017: review of hospital records of 7 patients who had been diagnosed with TB and later died

Total 15 patients:

Substance misuse: 5/8

Alcohol misuse: 11/14

Homelessness: 3/13

Imprisonment: 0/2

Migrants: 0/13

Smoking: 8/9

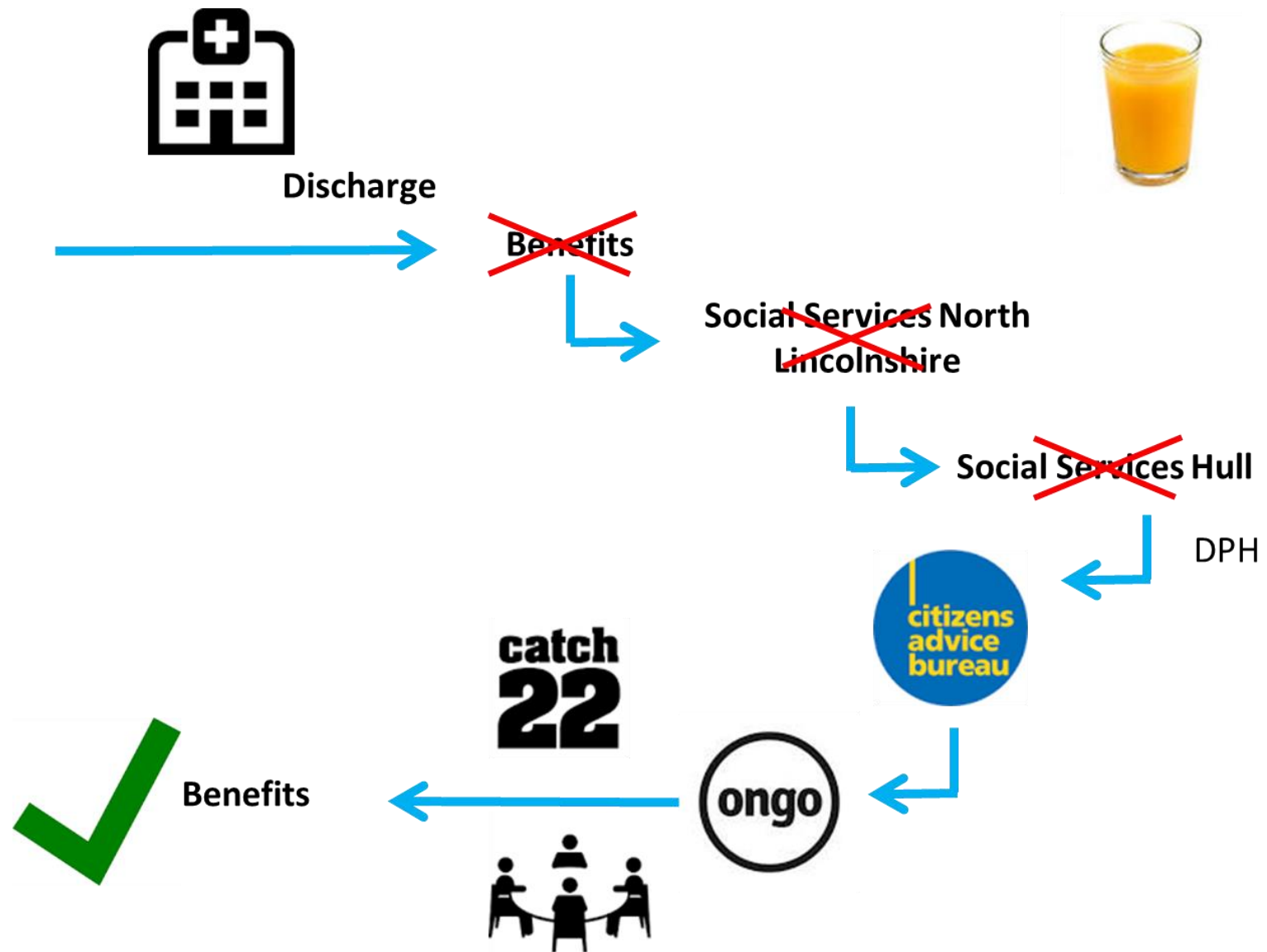
Case Study 1

53 year old male, history of mental illness, chaotic housing, smoker, history of alcoholism, admitted to DPOW ten days before death with severe respiratory symptoms.

Case Study 2

29 year old female, chaotic housing, parents had alcohol problems, child/domestic abuse, child with disability (adopted), depression and self-harm, alcohol and drug abuse, seen in DPOW on several occasions with symptoms of coughing blood but no evidence that TB was ever diagnosed.

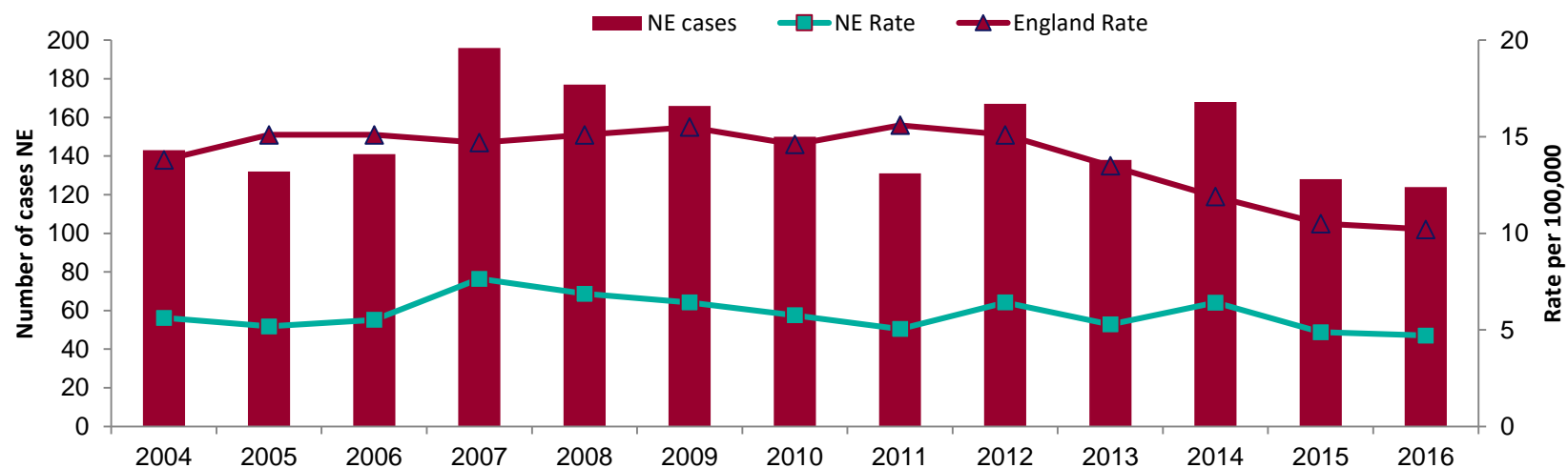
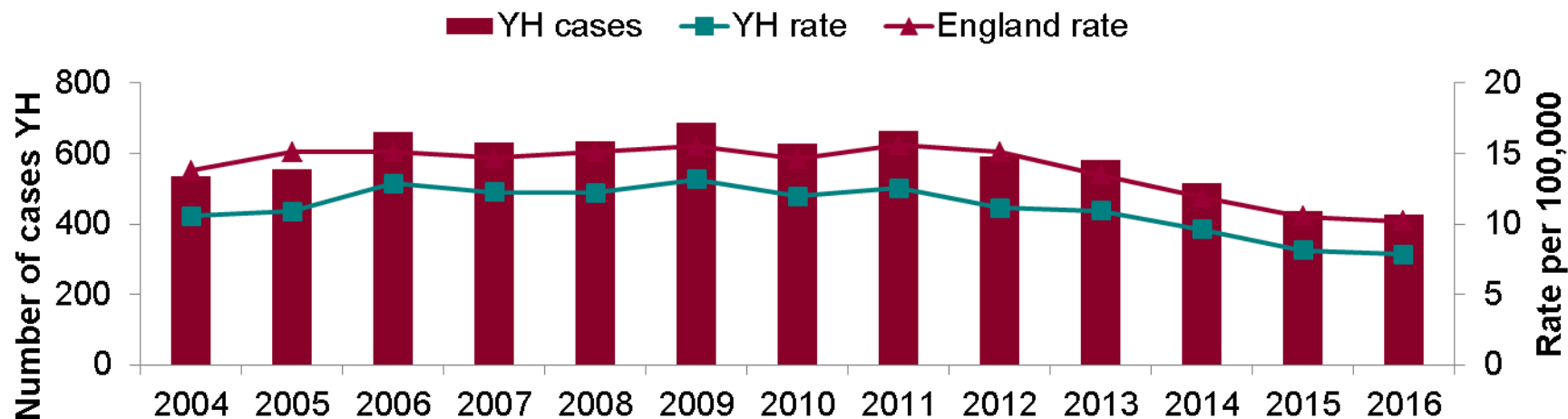
NRPF a growing problem



What we have done

- New clinical and nursing networks
- LTBI programme in high incidence areas
 - >4,800 patients screened
 - \approx 16% positivity
- Working with CCGs to adopt national TB clinical policy/service specification
- Developing localised resource to implement new NICE guidance
- Recruitment of TB champions in some high burden areas
- Pathway for Patients with No Money, No Housing and/or No Recourse to Public Funds

Impact?



However...

