TB Epidemiologic Studies Consortium Update

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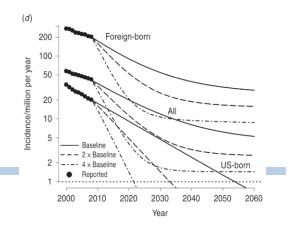
Summary of TBESC Activities

- Part A (mostly Baltimore City) 2011-January 2017
 - Head to head comparison of TST, QFT, and TSPOT for >20,000 enrollees in 10 sites in the US
 - 2-year follow-up for (+) to detect TB disease
 - Substantial numbers of enrollees for HIV+ (>2,500)
 and for children <5 years old (>600)
 - QFT-Plus head-to-head comparison with QFT-GIT (N=500); additionally targets CD8 cells as part of cellular immune response

Summary of TBESC Activities

- Part B (Baltimore City and County)
 - January-June 2017: LTBI activities in LHDs (LTBI screening and treatment)
 - July-December 2017: LTBI activities with other providers serving high risk populations
- Part C future, LTBI interventions
- Part D ~Fall 2017: TBTC Study 37, a clinical trial for 6 week regimen of INH/rifapentine, daily selfadministered

Part B: Reaching TB Elimination

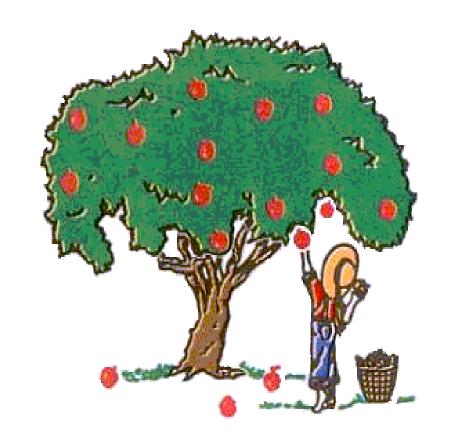


- Plateau in TB case numbers
- TB transmission in the U.S. is limited, though persistent
- TB elimination: <1 case per million population
- We cannot approach TB elimination without proactively tackling latent TB infection (LTBI)
- New tests (IGRAs) for diagnosing LTBI
- Shorter LTBI treatments, with high completion rates
- But ...

Part B: Reaching TB Elimination

January 2017-June 2017

- Review of local health department LTBI services
- We can do better but can't get to TB Elimination!
- Funding cuts = fewer populations served by LHD (contacts, B-waivers)



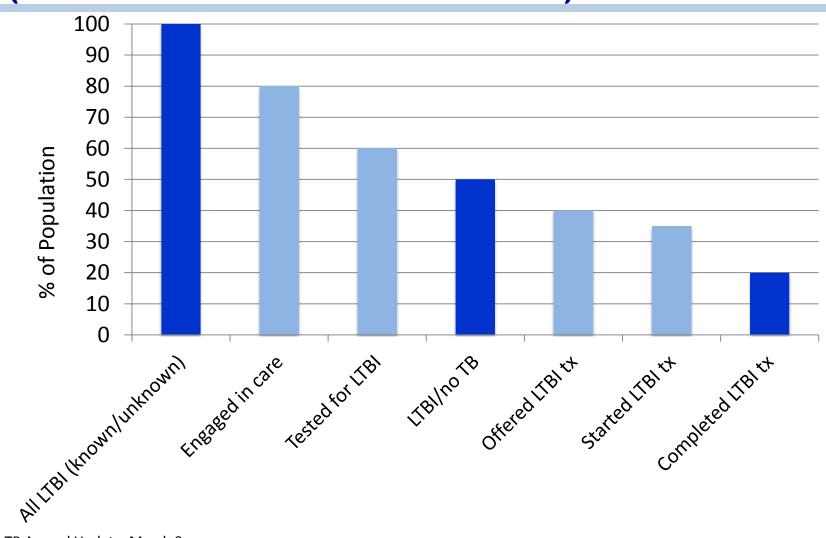
Part B: Challenges to TB Elimination – June 2017

 We don't know enough about the TB 'at risk' populations: WHO, WHERE, HOW MANY?

 We don't know WHICH non-health department providers serve 'at-risk' populations of interest

 We don't know who IS and who IS NOT receiving LTBI services outside the health departments

Part B: TB Prevention Cascade to Cure ("Treatment as Prevention")



Questions?