Tuberculosis and lung disease: threats and promises

South Kensington Campus
Imperial College London
Poster round 8 – Friday 6 July, 13:25-13:55
Epidemiology of TB

Chairs: Delphine Antoine and Karin Ronning

121. UPTAKE, USE AND USEFULNESS OF THE NATIONAL TUBERCULOSIS STRAIN TYPING SERVICE: A SURVEY OF CLINICAL AND PUBLIC HEALTH STAFF
Jessica Mears
University College London

122. GENOTYPIC ANALYSIS OF A TUBERCULOSIS OUTBREAK IN A NORTHERN CANADIAN TERRITORY
Joyce Wolfe 1, Sara Christianson 1, Elaine Randelli 2, Maureen Baikie 2, Meenu Sharma 2
1Public Health Agency of Canada, 2Department of Health and Social Services, Government of Nunavut

123. THE TRENDS OF TUBERCULOSIS IN KOSOVO IN THE POST WAR PERIOD, (2001-2010)
Bahri Tiganj 1, Xhevat Kurhasani 2
1CDF (Community Development Fund), 2NGOKEA

124. INCIDENCE AND CLINICAL CHARACTERISTICS OF ANTITUBERCULOSIS DRUG-INDUCED CUTANEOUS ADVERSE DRUG REACTIONS
Wilawan Thongraung 1, Chanida Kanjanapradit Kanjanapradit 2, Petchawan Pungrassami 3
1Faculty of Pharmaceutical Sciences, Prince of Songkla University, 2Chiangai Hospital, Thailand, 3Zonal TB center 12, Yala, Thailand

125. SITUATIONS, TREATMENT OUTCOME AND FACTOR ASSOCIATED WITH TREATMENT SUCCESS AMONG NON-THAI MIGRANT TB PATIENTS IN URBAN PROVINCES, THAILAND
Pornsak Khortwong 1, Jarani Kaewkungwai 2
1Thailand Principal Recipient, 2Faculty of Tropical Medicine, Mahidol University

126. INFLUENCE OF THE RISK FACTORS AND BELONGING TO THE RISK GROUPS IN MANIFESTING OF THE RETREATED TUBERCULOSIS
Liljana Simonovska 1, Mirjana Trajcevska 1, Marija Metodieva 1, Gordana Kamceva 2
1Institute for lung deseases and tuberculosis, 2Faculty of Medicine Stip

127. THE RELATIVE INCIDENCE OF EXTRAPULMONARY TUBERCULOSIS DECREASES DESPITE AN INCREASING INCIDENCE OF TB/HIV CO-INFECTION
Alain Altraja 1, Piret Viklepp 2, Lea Pehme 3
1Department of Pulmonary Medicine, University of Tartu, Tartu, Estonia, 2Estonian Tuberculosis Registry, National Institute for Health Development, Tallinn, Estonia, 3Lung Clinic, Tartu University Hospital, Tartu, Estonia

128. EPIDEMIOLOGICAL ASPECTS OF INFECTIONS CAUSED WITH HEPATITIS B AND C VIRUSES AT PATIENTS WITH LUNG TUBERCULOSIS
Irada Akhundova 1, Eljan Mammadbayov 1, Aybeniz Dashevna 2, Murad Mamedov 3
1Scientific Research Institute of Lung Diseases, 2Republic AIDS Centre, 3National Centre of Oncology

129. PATHOGENETIC PECULIARITIES OF INFECTIONS CAUSED WITH HEPATITIS B AND C VIRUSES AT PATIENTS WITH LUNG TUBERCULOSIS LIVING IN AZERBAIJAN
Irada Akhundova 1, Eljan Mammadbayov 1, Aybeniz Dashevna 2, Murad Mamedov 3
1Scientific Research Institute of Lung Diseases, 2Republic AIDS Centre, 3National Centre of Oncology

130. FIRST NATIONAL RESULTS ON TREATMENT OUTCOME MONITORING OF TUBERCULOSIS PULMONARY CASES NOTIFIED IN FRANCE
Delphine Antoine, Didier Che
Institut de Veille Sanitaire

131. INVESTIGATING A CLUSTER OF NON-UK BORN HEALTH CARE WORKERS
Nicholas Fulton, Tim Brown, Laura Anderson
Health Protection Agency
132. THE PREVALENCE OF VIRAL HEPATITIS IN PATIENTS UNDERGOING ANTI-TUBERCULOUS THERAPY
David Connell1, Hesam Ahmadi Nooredinvar1, Mahmoud Asghedi1, Mohammed Abdullah1, Marie O’Donoghue2, Louise Campbell2, Aijt Lavani1, Melissa Wickremasinghe2, Onn Min Kon2, Shahid Khan1
1Imperial College London, 2Imperial College Healthcare NHS Trust

133. UPTAKE OF NEONATAL BCG IN ENGLAND BETWEEN 2006 AND 2008: PERFORMANCE OF THE NEW VACCINATION POLICY GUIDANCES
Patrick Nguipdop Djomo1, Debora Pedrazzoli2, Ibrahim Abubakar2, Punam Mangtani1
1London School of Hygiene Tropical Medicine, 2Health Protection Agency

6th Conference of the Union Europe Region
4-6 July 2012, London
Influence of the Risk Factors and Belonging to the Risk Groups in Manifesting of the Re-Treated Tuberculosis

In the period of 2009-2011, the histories of the 50 re-treated patients with lung tuberculosis has been analyzed, which presented 9.6% of the hospitalized patients.

Among them, 66% were men and 34% were women, with average age of 41 year.

Among 54% of the re-treated patients with tuberculosis, the risk factor was present or they belonged to the risk group.

Alcoholism was present at 20% of the examined patients, and 10% within the risk group - prisoners.

Drug addiction, diabetic and psychiatric diseases were represented among 6% of the re-treated patients.

In most of the cases, risk factors and belonging to a risk group were present among the defaulters (66%).

In 53% of the examined patients, multiple risk factors were present.

AR B were isolated at 96% of the re-treated patients with risk factor - statistical significantly more often ($x^2=3.33$, $p<0.1$), compared to the rest of the re-treated patients (73%).

Massive lung tuberculosis was present at 33% of the re-treated patients with risk factor and they were statistical significantly more often ($x^2=0.6$, $p<0.1$), compared to the group without risk factor.

Analyzing the results from DST, we didn’t find statistical significant difference in the presence of the resistant isolates of the M. tuberculosis at the re-treated tuberculosis, with or without risk factor or belonging to a risk group.

Conclusion: Risk factors and belonging to a risk group are of essential meaning for the manifesting, outspreading and infectious of the re-treated tuberculosis.