

TUBERCULOSIS ACTIVE CASE-FINDING AT WORK PLACE IN A COUNTRY WITH LOW TUBERCULOSIS INCIDENCE RATE

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B A N G K O K

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Jurcev Savicevic Anamarija^{1,2,3}, Puharic Zrinka⁴

¹ Teaching Public Health Institute of Split-Dalmatia County, Split, Croatia; ² School of Medicine University of Split, Croatia; ³ Faculty of Health Sciences University of Split, Croatia;

⁴ Faculty of Dental Medicine and Health, University of Osijek, Croatia

Objective: To present extensive contact tracing at work place of smear-positive index patient in Croatia, European country with TB low incidence rate, and describe outbreak.

Methods: Contact tracing was performed mostly in concentric circles. It involved TB education, interviewing, TST, chest X-ray and additional tests as needed.

RESULTS: Contact investigation at work place included 227 persons. Initially TST was done in 223 people, 20 of them not returned for the reading; 48% had negative result, more of 14 mm was recorded in 7% and more than 20 mm in one tested contacts. CXR was refused or CXR results were not delivered in 55 workers. Consultation of pulmonologist was requested for 29 tested workers. Three new TB patients were identified; with TST results 17 mm, 8 mm and the patient with diabetes on insulin therapy), all with CXR suggestive of TB. In two of them TB was bacteriologically confirmed (Figure 1). Isolated strains were genotyped and all three bacteriologically confirmed cases had same code. The follow-up was done after the window period with no detected new cases.

Challenges: Stigmatization of the index patient
More field trips (14 times)
Failure to attend the TST reading
Refusal of CXR
Failure to submit findings for evaluation
Poor response after the window period

Conclusion: Two new TB patients, who were not close contacts, were rapidly detected by spreading the contact investigation. Isolated genotype is not common in Croatia. That points to TB transmission as a result of late detection of the disease, due to the patients and/or health system delay. In addition, non-compliance with recommended screening points out a worrisome health behaviour.

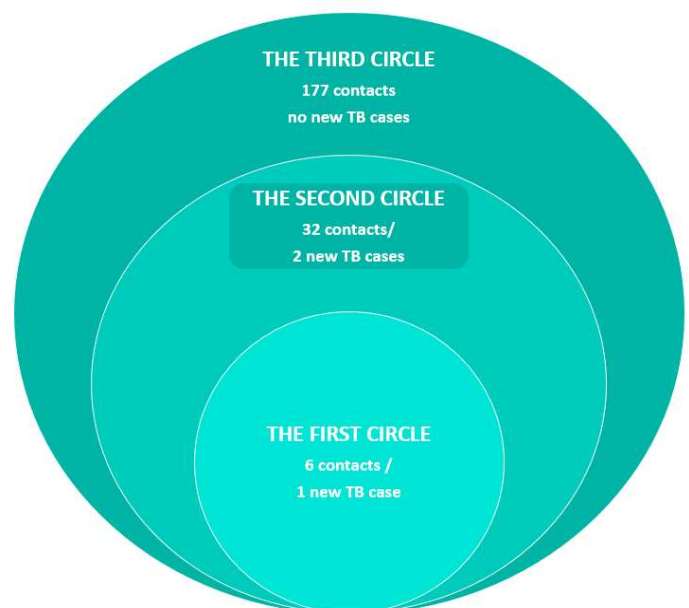


Figure 1. Results of tuberculosis active case-finding at work place