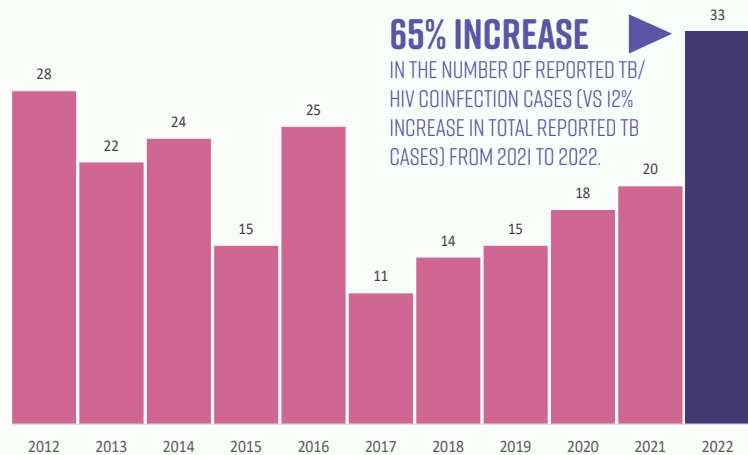




FREQUENCY OF TUBERCULOSIS CASES COINFECTED WITH HIV IN THE PAST 11 YEARS

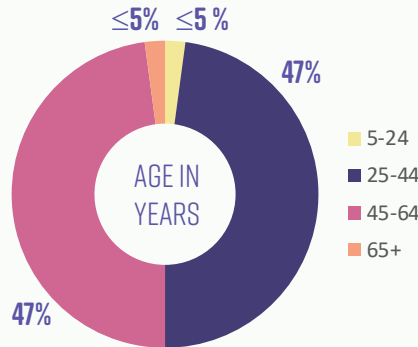
Tuberculosis (TB) disease is a life-threatening opportunistic infection for people living with HIV. A trend of increased TB cases with HIV coinfection has been seen in Los Angeles County (LAC) since 2017. Left untreated, TB infection¹ in individuals with poorly controlled HIV carries a 30% increase risk of progressing to active TB disease.



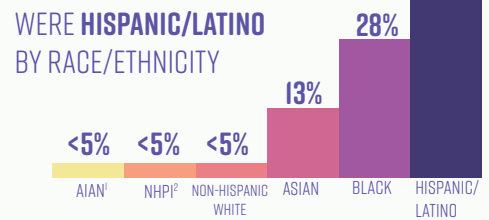
SUMMARY DATA OF TUBERCULOSIS CASES COINFECTED WITH HIV, 2018-2022 (N=100)

DEMOGRAPHICS

90% WERE MALE AT BIRTH



53% WERE HISPANIC/LATINO BY RACE/ETHNICITY



¹AMERICAN INDIAN AND ALASKA NATIVE
²NATIVE HAWAIIAN AND PACIFIC ISLANDER

COUNTRY OF BIRTH

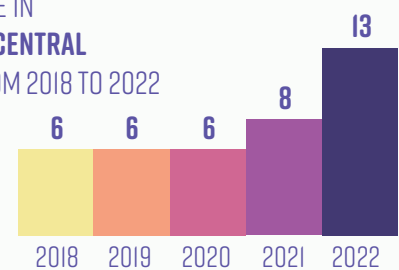
63% WERE NON-US BORN INDIVIDUALS



43% OF NON-US BORN WERE BORN IN MEXICO

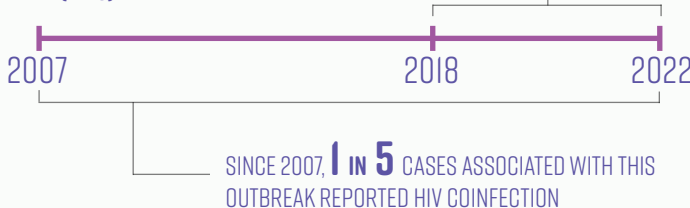
SITE OF DISEASE

117% INCREASE IN DISSEMINATED/MILIARY/CENTRAL NERVOUS SYSTEM² TB FROM 2018 TO 2022



OUTBREAK

FROM 2018-2022, **35%** OF CASES ASSOCIATED WITH A LAC OUTBREAK³ IN PERSONS EXPERIENCING HOMELESSNESS (PEH)⁴ REPORTED HIV COINFECTION (N=13)



OTHER NOTABLE CHARACTERISTICS

- 47%** OF CASES REPORTED CD4⁵ COUNT <200 (N=47)
- 41%** OF CASES REPORTED INJECTION OR NON-INJECTION DRUG USE (N=41)
- 27%** OF CASES REPORTED HOMELESSNESS WITHIN THE 12 MONTHS PRECEDING TB DIAGNOSTIC EVALUATION (N=27)
- 20%** OF CASES REPORTED HEAVY ALCOHOL USE (N=20)
- 15%** OF CASES DIED BEFORE COMPLETING TREATMENT (N=15)
- 8%** OF CASES WERE RESIDENTS OF A CORRECTIONAL FACILITY AT DIAGNOSIS (N=8)

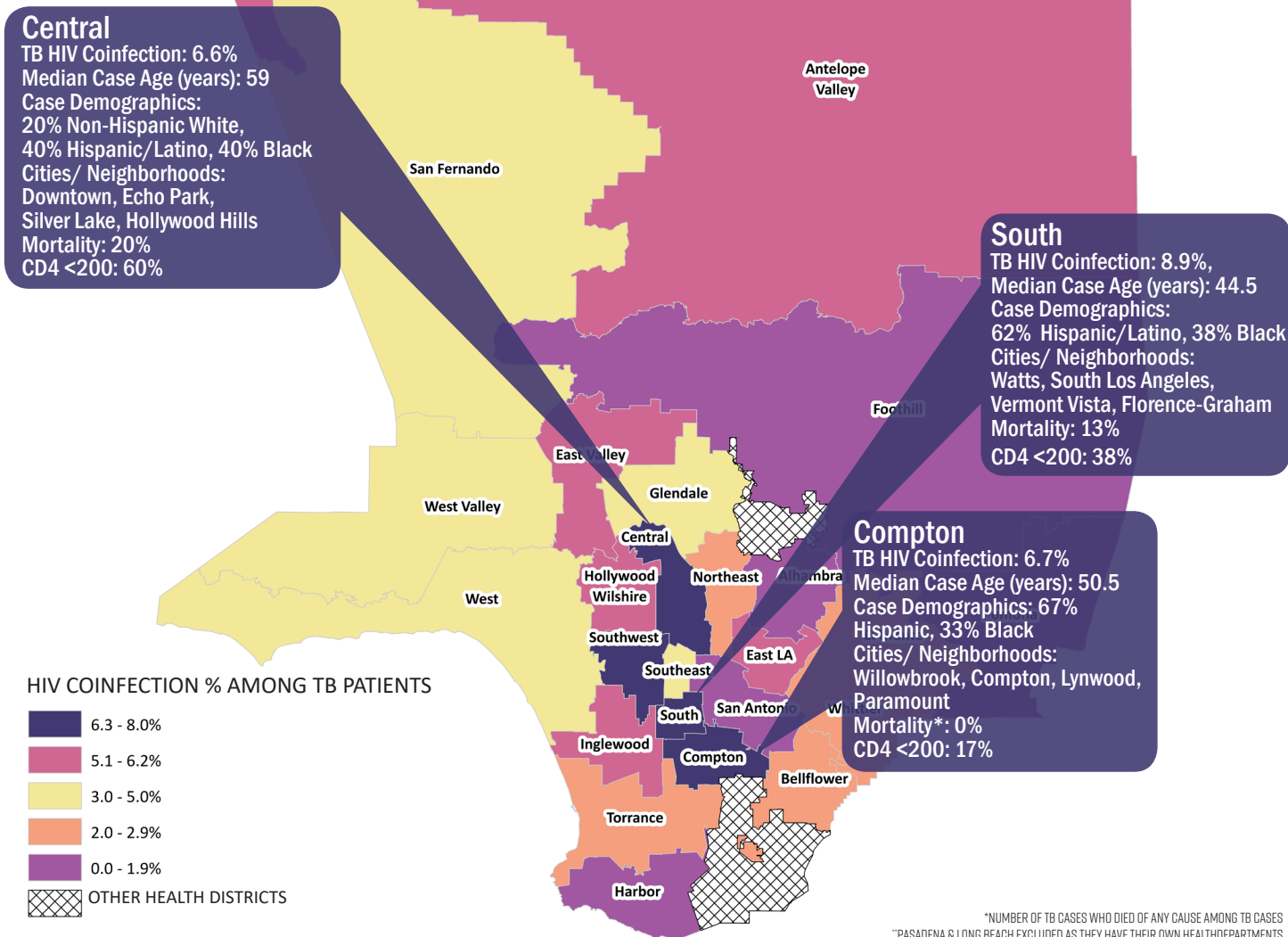
1. LATENT TB INFECTION. 2. DISSEMINATED/MILIARY/CENTRAL NERVOUS SYSTEM TB REPRESENT CASES THAT HAVE INCREASED SEVERITY AND COMPLEXITY FOR TB TREATMENT. 3. REFERS TO AN ONGOING LAC TB OUTBREAK SINCE 2007 (N=213). 4. PEH IS DEFINED AS PERSONS EXPERIENCING HOMELESSNESS WITHIN THE 12 MONTHS PRECEDING TB DIAGNOSTIC EVALUATION. 5. CD4 IS AN INDICATOR OF IMMUNE FUNCTION WITH A NORMAL RANGE BETWEEN 500 TO 1500 CELLS/MM³.

Tuberculosis and Human Immunodeficiency Virus (HIV) Coinfection

in Los Angeles County, 2018-2022



TB HIV COINFECTION RATES BY HEALTH DISTRICT, 2018-2022 (TOP 3 DISTRICTS WITH HIGHEST RATES HIGHLIGHTED)



TB CONTROL PROGRAM HIGHLIGHTS

- » Attained a 90% (N=65) treatment completion rate for TB/HIV coinfecting individuals between 2018 and 2022.
- » Implemented enhanced active surveillance for disseminated and central nervous system (CNS) TB, which are forms of TB that are difficult to diagnose and more likely to have a poor treatment outcome.
- » Strengthened coordination efforts within the Department of Public Health to ensure seamless linkage of TB/HIV coinfecting individuals not engaged in HIV care to essential antiretroviral (ARV) treatment services.
- » Launched a pilot program for directly observed therapy, encompassing both anti-TB and ARV medications, to provide comprehensive support and foster adherence to treatment regimens for both TB disease and HIV.
- » Distributed a total of 2338 nights of housing and 4889 grocery or restaurant gift cards to 40 PEH with HIV/TB coinfection and 273 of individuals exposed to TB.
- » Completed contact tracing in 15 Single Resident Occupancy settings between 2020 and 2023.
- » Assured genotyping for an average of 98% of TB isolates from 2020 to 2022.
- » Facilitated professional development by training over 300 healthcare professionals in 2023, offering vital updates on HIV medicine, combination ARV therapy, and the nuances of care coordination.

For more info on TB, please call 213-745-0800 or visit the QR code →

