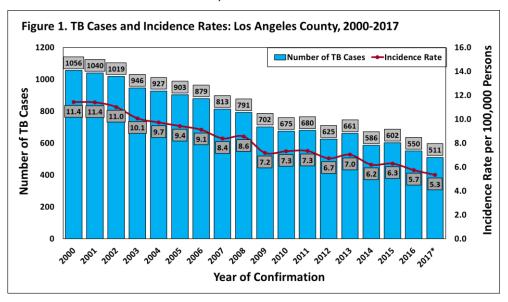
# Tuberculosis in Los Angeles County, CA: A Snapshot Fact Sheet 2017



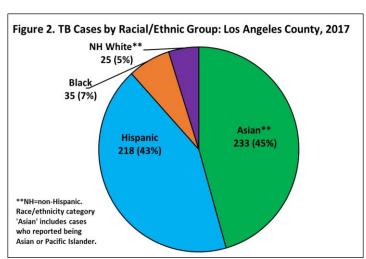
## **Overview of Tuberculosis in Los Angeles County**

- In 2017, a total of 511 new tuberculosis (TB) cases were reported in Los Angeles County (LAC), a 7.1% decrease from 550 cases in 2016 (Figure 1). The latest state surveillance data indicate that in the past decade LAC has accounted for about 30% of TB cases in the state of California.<sup>1</sup>
- In 2017, the incidence rate of TB in LAC was 5.3 per 100,000 persons. In the past few years, LAC's incidence rate has been ranked among the 10 highest rates among California's local health jurisdictions, and has been higher than the overall state incidence rate, and twice the national incidence rate.



### Racial/Ethnic Group

- In 2017, TB cases were comprised of 45% Asians (n=233), 43% Hispanics (n=218), 7% Blacks (n=35), and 5% non-Hispanic Whites (n=25) (Figure 2).
- The TB incidence rate was highest among Asians (16.7/100,000), followed by Hispanics (4.6/100,000), Blacks (4.5/100,000), and non-Hispanic (NH) Whites (0.9/100,000).
- For the third year in a row, Asians were the racial/ethnic group with the largest number of TB cases. In 2016, they also accounted for 45% of TB cases.



#### Persons Born Outside the U.S.

Among TB cases with a known place of birth, there were 5 times as many cases born outside the U.S. (n=428, 85%) than there were cases born in the U.S. (n=77, 15%). Among TB cases born outside the U.S., 71% (n=303) originated from the following five countries: Mexico, Philippines, China, Vietnam, and Korea. Also, 84% (n=357) of TB cases born outside the U.S. reported having spent 5 or more years in the U.S. at the time of TB diagnosis.

Data exclude Pasadena and Long Beach TB cases. Updated 2/26/18, data are provisional and subject to change. Population estimates source: Internal Services Department, Los Angeles County. 2017 incidence rate was calculated using 2016 LAC population estimate.

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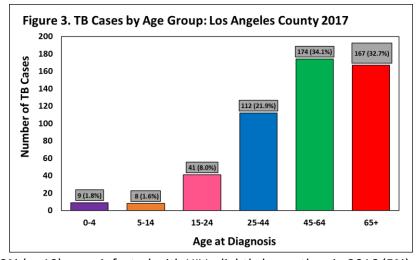
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# **Young Children and Older Adults**

- There were 1.8% (n=9) cases of TB among children ages 0 to 4 years (Figure 3), a small increase from 8 cases reported in 2016. The 2017 incidence rate (1.6/100,000) exceeds the CDC 2020 target rate (0.3/100,000).
- Persons 65+ years of age represented 32.7% (n=167) of TB cases in 2017. This age group had the highest rate of TB (13.6/100,000).



#### **HIV and Other Medical Comorbidities**

- Among all TB cases with known HIV status, 2% (n=10) were infected with HIV; slightly lower than in 2016 (5%). People living with HIV have one of the highest risks for rapid progression from TB infection to TB disease.<sup>3</sup>
- 38% (n=192) of adult (18+ years of age) TB cases had one or more medical comorbidities, such as diabetes mellitus, end-stage renal disease, or another immunosuppressive condition (not HIV). These comorbidities increase a person's likelihood to progress from TB infection without symptoms to active TB disease. The most common comorbidity was diabetes mellitus (n=154 or 32% of adult TB cases).

### Homelessness

Persons experiencing homelessness are particularly vulnerable to TB. Factors such as crowded living situations, lack of access to health care, and delayed diagnosis increase the risk of transmission in this population. In 2017, 6% (n=28) of TB cases in LAC reported experiencing homelessness within the past year, less than 2016 (8%).

## Multidrug-Resistant (MDR) TB

- In 2017, there were 0.6% (n=3) new MDR-TB cases reported in LAC. Despite the significant increase of MDR-TB in some global regions<sup>3</sup>, in LAC, the proportion of MDR-TB cases has remained relatively constant, averaging between 1% and 2% of TB cases during 2013-2017.
- Treatment of MDR-TB is more complex, lengthy (1 ½ to 2 years), and costly than treatment of drug-susceptible TB.<sup>4</sup>

#### **Deaths among Persons with TB**

• Among TB cases confirmed between 2013 and 2017 (n=2,910), there were 12% (n=342) deaths, including deaths due to TB and deaths unrelated to TB disease. Of these, 76% (n=260) died while receiving TB treatment.

#### References

- 1. California Department of Public Health, TCB. Report on Tuberculosis in California Data Tables, 2016. 2017: Richmond, CA.
- 2. Centers for Disease Control and Prevention. Reported Tuberculosis in the United States, 2016. 2017: Atlanta, GA.
- 3. World Health Organization. Global Tuberculosis Report 2017. 2017: Geneva.
- 4. Marks, S., et al. *Treatment Practices, Outcomes, and Costs of Multidrug Resistant and Extensively Drug Resistant Tuberculosis in the United States, 2005-2007.* Emerging Infectious Disease, 2014. 20(5): p. 812-821.

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