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Experience of medical staff for latent tuberculosis infection screening**Kyeong-Soo Lee^{1,2}, Kwan Ho Lee^{1,2}, Jin Hong Chung^{1,2}, Kyeong-Cheol Shin^{1,2}, Eun Young Choi^{1,2}, Hyun Jung Jin^{1,2}, Tae-Yoon Hwang^{1,2}, Misook Lee¹, Eunjung Kim¹, Yeongju Kim¹, Hyejin Nam¹ and Dayoung Park¹**¹Yeungnam University Hospital, Republic of Korea²Yeungnam University, Daegu, Republic of Korea

Statement of the Problem: The average incidence of tuberculosis in OECD countries is 12.0 per 100,000 population, with a prevalence of 14.8 and a mortality rate of 0.7. The incidence of tuberculosis in Korea is 86 per 100,000 population, with a prevalence of 101.0 and a mortality rate of 3.8, the highest among OECD countries. Recently, these indicators are not showing any significant decline. In particular, if a medical or postpartum care agency staff working at a hospital or a teacher/staffs working at a school is infected with TB, it can infect a patient or a student. If a patient occurs in a hospital or school, it may spread to the community. The purpose of this study was to examine the latent TB infection group and prevent latent tuberculosis infection in a university hospital in Korea.

Methodology: We conducted a screening test for latent tuberculosis for 2 months from May to June 2016 in 396 people at one university hospital. The subjects were selected according to 'the manual of medical institution's latent tuberculosis infection examination' of KCDC considering the possibility of exposure to tuberculosis and the spreading effect of tuberculosis. The subject of the examination was explained through three briefing sessions. Interferon-Gamma Release Assays (IGRA) was performed on tuberculin skin test (TST) prospectors according to the decision of the Occupational Safety and Health Committee.

Findings: Of the 395 eligible subjects, 381 were tested for TST. Fourteen patients who were pregnant or who had a history of positive TST performed IGRA without TST. 122 patients with TST were also tested for IGRA. As a result, 61 patients were positive, 1 patient was indeterminate and 74 patients were negative. There was no active tuberculosis in chest PA test for 61 patients (15.4%) who were positive for IGRA. Patients with latent tuberculosis were prescribed a combination of INH+RIF for 3 months to minimize the duration of treatment and there were no side effects during treatment.

Conclusion & Significance: It is a case of screening and treating latent tuberculosis in one university hospital in Korea to prevent the occurrence and transmission of tuberculosis in medical institutions. In order to apply appropriate screening and treatment methods for the detection and treatment of successful latent tuberculosis, understanding and trust between hospital management, medical staff and workers is important.

Biography

Kyeong-Soo Lee is the Head of the Preventive Services Center at the Regional Center for Respiratory Disease, Yeungnam University Hospital. His major is Preventive Medicine, and he has extensive experience in community health work and professional workforce training. Since 2008, he has been involved in Community Health Survey (CHS) in Korea and has participated in research and projects to promote health promotion, chronic diseases, and infectious diseases at the national or local government level.

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