



Tuberculosis Control

Phone: 515-281-7504
<http://idph.iowa.gov/immmtb/tb>

Protecting & Improving
the Health of Iowans



It's a disease as old as antiquity. Archeologists have found mummies with signs of it. Your grandparents or great-grandparents called it "consumption." Today, we know the disease as tuberculosis, or TB. Although an ancient disease, it's still around and the Iowa Department of Public Health's Tuberculosis Control program continues the fight against TB.

You may not know that Christmas Seals were introduced to help raise funds to fight TB. The organization that pioneered the Christmas Seals, the National Tuberculosis Association, became what's now known as the American Lung Association.

Less than two decades ago, Iowa averaged 65 TB cases each year. Now, through the efforts of the TB Control program, the number of cases has fallen to an annual average of 46 cases. The TB Control Program provides free treatment for Iowans with TB infection or disease through the Prescription Services Program. By treating more than 1,200 Iowans a year for latent TB infection, approximately 120 infectious cases of TB are avoided. Proper treatment prevents exposure of others to TB disease and its complications.



Did you know?

Patients who do not take their medications correctly or who are improperly treated can develop a virtually untreatable form of TB.

Why is the TB Control program important to protecting and improving the health of Iowans?

- Tuberculosis remains a public health problem in Iowa with an average of 46 cases reported each year.
- Over 1,000 Iowans are diagnosed with latent TB infection each year. Latent TB infection (LTBI) can lead to future cases of TB disease.
- Infectious cases of TB must be treated to prevent others from becoming infected.
- Early treatment saves money! Treating someone with a latent TB infection costs approximately \$500. Treating someone who has developed TB disease costs approximately \$18,000; multidrug-resistant TB - \$160,000; and extensively drug-resistant TB - \$513,000.

Which Iowa Public Health Goals are we working to achieve?

Prevent epidemics & the spread of disease

Strengthen the health infrastructure

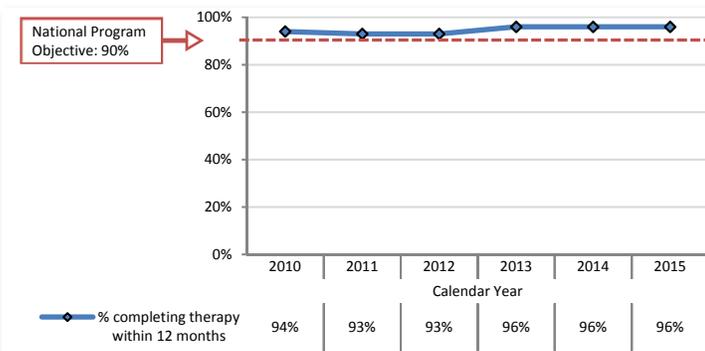
Promote healthy living

What do we do?

- Provide funding for local health departments to give TB tests, treatment and chest x-rays for TB patients.
- Provide funding for the University of Iowa Hygienic Lab to perform state of the art TB laboratory testing.
- Maintain a system to ensure positive TB lab tests are reported to IDPH for surveillance and disease investigation.
- Advise health care providers who evaluate and treat Iowans with TB and LTBI.
- Provide treatment for more than 1,200 Iowans with LTBI or TB disease each year.
- Ensure medications for active and suspected cases of TB are shipped within 24 hours of the prescription being written.
- Ensure medications for LTBI are sent within three working days of the prescription being issued.

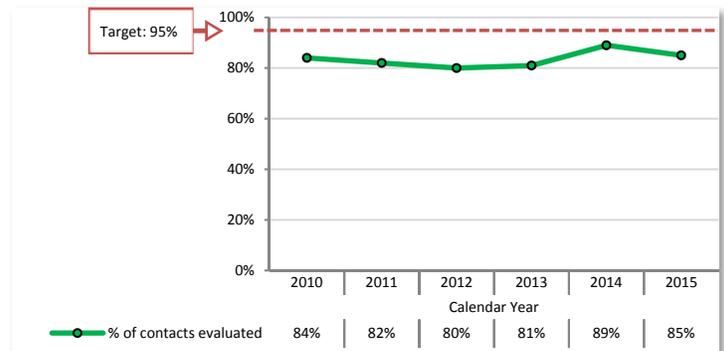
How do we measure our progress?

- ❶ Percent of patients with newly diagnosed TB, for whom therapy for one year or less is indicated, who complete therapy within 12 months.



Data Source: CDC software program - Tuberculosis Information Management System. Data are compiled annually, but possibly not complete until 9 months into the next year.

- ❷ Percent of contacts to sputum AFB-smear positive TB cases evaluated for infection and disease.



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How are we doing? Iowa consistently meets or exceeds the national program objective of 90%. Local health departments assure completion of therapy for patients with infectious TB by providing directly observed therapy (DOT), the **standard of care**. This means a designated health care worker watches the patient take each dose of medication, ensuring completion of therapy and thus stop the transmission of disease. The TB Control program provides incentive funding to local public health departments to perform DOT. Consequences of incomplete therapy include:

- treatment failure
- relapse
- multiple drug resistant tuberculosis (MDR-TB).

How are we doing? Iowa prioritizes the evaluation of those with recent and significant exposure to infectious TB and is above the national average for this objective. All infectious cases require a contact investigation by the local health department to identify contacts who:

- Have TB disease so that they can be given treatment and further transmission can be stopped.
- Have Latent TB Infection (LTBI) so that they can be given treatment for LTBI and active disease can be prevented.

What can Iowans do to help?

1. Maintain a healthy lifestyle, especially when visiting other countries where TB is common. For more information, go to www.cdc.gov/travel/yellowBookCh4-TB.aspx.
2. Local public health should follow recognized standards when caring for TB patients. For more information, go to <http://idph.iowa.gov/imm/tb/local-public-health>.
3. Clinicians should be vigilant about the early diagnosis of TB and ensure proper treatment. For more information, go to www.cdc.gov/tb/pubs/PDA_TBGuidelines/default.htm.

Expenditures

General fund & federal funds: K15-1541/1551(20%)/1601; 0153-1602

	State Fiscal Year 2016 Actual	State Fiscal Year 2017 Actual	State Fiscal Year 2018 Estimate
State funds	\$55,019	\$146,058	\$133,014
Federal funds	\$343,334	\$367,554	\$328,450
Total funds	\$398,353	\$513,612	\$461,464
FTEs	1.68	1.89	1.85

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.