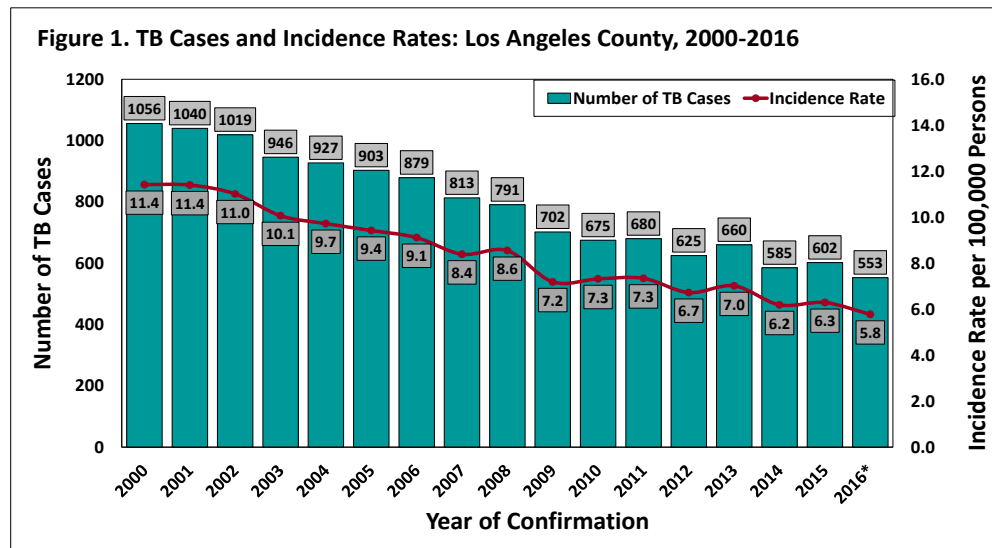


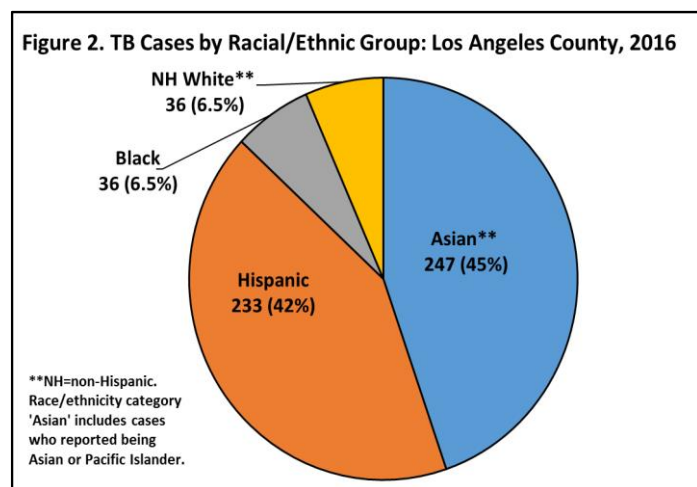
### Overview of Tuberculosis in Los Angeles County

- In 2016, a total of 553 new tuberculosis (TB) cases were reported in Los Angeles County (LAC), an 8.1% decrease from 602 cases in 2015 (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 2016, the incidence rate of TB in LAC was 5.8 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,<sup>1</sup> and twice the national incidence rate.<sup>1,2</sup>



### Racial/Ethnic Group

- In 2016, TB cases were comprised of 45% Asians (n=247), 42% (n=233) Hispanics, 6.5% (n=36) Blacks, and 6.5% (n=36) non-Hispanic Whites (Figure 2).
- The TB incidence rate was highest among Asians (17.7/100,000), followed by Hispanics (5.0/100,000), Blacks (4.6/100,000), and non-Hispanic (NH) Whites (1.3/100,000).
- For the third year in a row, Asians were the racial/ethnic group with the largest number of TB cases. In 2015, 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 four times as many cases born outside the U.S. (n=448, 82%) than there were cases born in the U.S. (n=99, 18%). Among TB cases born outside the U.S., 73% (n=322) originated from the following five countries: Mexico, Philippines, China, Vietnam, and Korea. Also, 81% (n=362) 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.

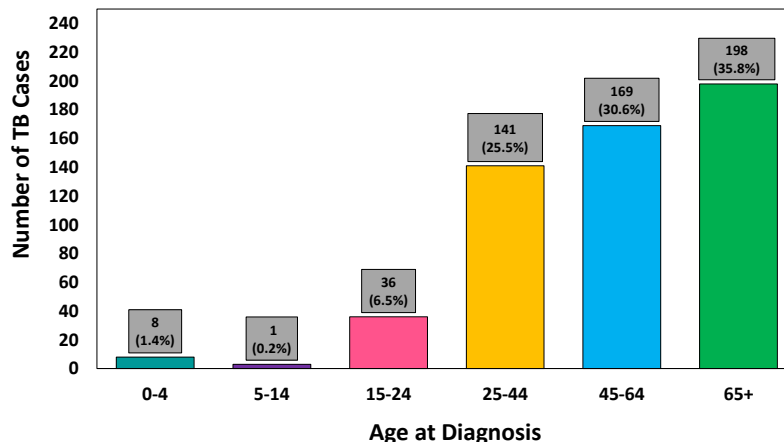
*Pasadena and Long Beach TB cases are excluded because these two cities have their own TB Control Programs. LAC TB data last updated 2/21/17. \*Data are provisional and subject to change. Population estimates source: Internal Services Department, Los Angeles County. 2015 population estimates used to calculate 2016 incidence rate. Suggested Citation: Tuberculosis in Los Angeles County: A Snapshot: Provisional Fact Sheet 2016. Los Angeles County Department of Public Health, Tuberculosis Control Program, Los Angeles, CA. March 2017.*



### Young Children and Older Adults

- There were 1.4% (n=8) cases of TB among children ages 0 to 4 years (Figure 3), an increase from 5 cases reported in 2015. Young children had one of the lowest rates of TB (1.3/100,000).
- Older adults continue to represent the age group with the largest number of TB cases (Figure 3). In 2016, persons 65+ years of age represented 35.8% (n=198) of TB cases. This age group had the highest rate of TB (16.6/100,000).

Figure 3. TB Cases by Age Group: Los Angeles County 2016



### HIV and Other Medical Comorbidities

- Among all TB cases with known HIV status, 5% (n=26) were infected with HIV; slightly higher than in 2015 (3%). People living with HIV have one of the highest risks for rapid progression from TB infection to TB disease.<sup>3</sup>
- 39% (n=211) 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=156 or 29% 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 2016, 7% (n=39) of TB cases in LAC reported experiencing homelessness within the past year, similar to 2015 (7.6%).

### Multidrug-Resistant (MDR) TB

- In 2016, there were 2% (n=9) 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 2012-2016.
- 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 2012 and 2016 (n=3,026), there were 12% (n=353) deaths, including deaths due to TB and deaths unrelated to TB disease. Of these, 76% (n=269) died while receiving TB treatment.

### References

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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.