



Dear Health Care Provider:

TUBERCULOSIS (TB) IN WINNIPEG

Disruptions due to COVID-19 may have led to delayed patient presentation and reduced access to care. New monthly TB diagnosis rates have dropped by nearly half since March 2020 compared to the last two years. This suggests that there is more undiagnosed TB disease in community. Surveillance data from 2020 also suggests an increasing proportion of cases are being diagnosed late in disease. Delayed diagnosis is associated with poorer health outcomes and a greater potential for transmission.

The Winnipeg Health Region continues to see new cases of TB disease within the downtown area among persons who are unstably housed and/or using drugs. Ongoing transmission of TB disease in this population is concerning. **TB disease is often missed in health care encounters.** Early diagnosis and treatment improves clinical outcomes and reduces transmission.

In Winnipeg, TB disease is most frequently diagnosed in persons from countries with high incidence of TB, mainly (but not exclusively) from the Philippines, India and Sub Saharan Africa. Indigenous peoples are overrepresented among those who are unstably housed and infected with TB.

PRESENTATION of ACTIVE RESPIRATORY TB

- **Symptom Assessment:**
 - **Cough 2- 3 weeks or longer/change to a chronic cough; unexplained fatigue, fever, and/or weight loss.** Other symptoms may include: hemoptysis, night sweats, or chest pain.
 - **Pneumonia that does not improve with antibiotics, or that transiently improves with a quinolone (i.e., levofloxacin) and then relapses.**
 - TB disease can also present anywhere in the body; consider TB for any persistent, unexplained conditions, e.g., lymphadenopathy
- **Epidemiological Risk Factors:** rule out TB disease in symptomatic individuals who are unstably housed, and/or use drugs and/or from countries or communities with high TB prevalence.

TESTING (all resources are linked at end of this letter)

- **Sputum:** Ideally, 3 consecutive sputum samples for acid-fast bacilli (AFB) smears and culture, collected at least one hour apart.
 - An on-the-spot sample of sputum can be requested from symptomatic clients able to spontaneously expectorate (see attached document '*IPC Considerations For On-The-Spot Sputum Collection In Clinics*'). **Even one sputum is better than none.**
 - Samples are processed at the **HSC-site Microbiology Laboratory of Diagnostic Services, Shared Health** (formerly DSM). Samples may be submitted to any Diagnostic Services, Shared Health Microbiology Laboratory and will be transferred to the HSC site.
 - To assure proper sputum collection, see attached patient handout, lab manual instructions and sample DSM requisition (also linked at the end)
- **Chest radiography:** PA and lateral views
- **Tuberculin skin testing (TST)** is **NOT** recommended to test a client suspected of having **active TB** disease. Although a positive TST indicates that infection has occurred, it cannot determine whether this is a remote, latent or active infection. **For symptomatic individuals who may have active TB disease, you must collect sputum sample(s) and order chest radiography.**

REFERRAL

- If a health care provider is concerned that a client may have TB disease, consult **Adult Chest Medicine** at HSC paging: 204-787-2071; for children, page **Pediatric Infectious Diseases**.

CONTACTING PUBLIC HEALTH

- For general information or questions about TB, contact WRHA Population & Public Health TB Services: 204-940-2274 (Mon-Fri, 8:30-4:30)

REPORTING

Tuberculosis is reportable under *The Public Health Act*. All positive sputum results are reported by the laboratory to Manitoba Health.

RESOURCES:

- *Manitoba Tuberculosis Protocol*: gov.mb.ca/health/publichealth/cdc/protocol under 'Tuberculosis'
- '*Tuberculosis for Health Care Providers*' WRHA website: wrha.mb.ca/extranet/tuberculosis for information on TB; additional copies of attachments with this letter can be found in 'Resources' section
- Diagnostic Services, Shared Health (formerly DSM, Diagnostic Services Manitoba):
All reference materials listed at: <https://sharedhealthmb.ca/health-providers/diagnostic/reference-material>
 - Requisition: <https://apps.sbgh.mb.ca/labmanual/test/loadDocumentPdf?documentId=241>
 - *How to Collect Sputum Sample* (ENGLISH): <https://sharedhealthmb.ca/download/112/patient-information-brochures/740/pb120-10-05e.pdf>
 - *How to Collect Sputum Sample* (FRENCH): <https://sharedhealthmb.ca/download/112/patient-information-brochures/739/pb120-10-05e-fr.pdf>
 - *Clinical Microbiology Sample Collection Procedure Manual* (see Sputum chapter): <https://apps.sbgh.mb.ca/labmanual/test/findTestPrepare>