EV0475

ePoster Viewing

Clinical ID: mycobacterial infections (including diagnosis)

Extrapulmonary tuberculosis in Murcia, Spain, 1998-2012

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OBJECTIVES

To study the burden and trend of confirmed extrapulmonary tuberculosis (EPTB) diagnosed in our hospital over a 15-year period, analyzing the differences in the foreign-born population and in the HIV coinfected patients.

METHODS

We performed a retrospective descriptive analysis of the cases of EPTB microbiologically confirmed in our hospital between January 1998-December 2012. Patients were considered only once. The cases were grouped in 3 five-consecutive-year intervals (namely: Period1, Period2 and Period3)

EPTB was defined as a case with any positive culture of *Mycobacterium tuberculosis* complex (MTBC) from extrapulmonary samples, or positive pleural effusion samples with negative or no respiratory samples. Unknown HIV infection was considered as negative.

Cultures were performed in Lowenstein-Jensen(BD)®, and from 2006 also in Bactec MGIT 960(BD)®. Identification of the strains was performed by Accuprobe MTBC Kit®.

RESULTS

A total of 505 cases of tuberculosis were microbiologically confirmed between 1998 and 2012. EPTB corresponded to 122 (24.15%) cases. The proportions of EPTB during the study decreased from 43.4% in Period1 to 22.1% in Period3 (P<0.01).

EPBT was more frequent in male (54.7%). The mean age was 45.64 ± 20.53.

HIV co-infection was present in 27 (22.1%) cases, 25 of whom were male (p<0.01). The mean age in HIV-positive patients (37.78±11.74) was lower than in the non-HIV population (47.87±21.95) (P=0.02).

EPTB was more frequent than pulmonary tuberculosis in the HIV group (54%). EPTB in non-HIV patients was 24.05%. Disseminated (55.56%) and pleural infections (32.63%) were the most frequent presentations in HIV-positive and HIV-negative patients respectively. EPTB decreased in HIV population between Period2 and Period3 (28.6% to 7.1%).

Thirty-three (27%) patients were immigrants, 18 (54.5%) of which were male. The mean age of the immigrants and natives was 33.06±7.6 and 50.30±21.85 respectively (P<0.01). The proportion of EPTB in immigrants increased from 22.6-23.8% in the first decade to 40.7% in Period3. Lymphatic and disseminated presentations were the most prevalent in immigrant and native-born patients respectively. In 6 cases HIV infection and immigration concurred.

Acid-fast-bacilli smears of the clinical samples were positive in 51.85% of the HIV cases and in 9.47% of the HIV-negative cases (P<0.01). The rate of positivity in immigrants and natives was 17.85% and 25.35% respectively.

CONCLUSIONS

*The absolute number of EPTB cases diminished from 1998 to 2012, but since the pulmonary tuberculosis cases have decreased, the proportion of EPTB among all tuberculosis has remained stable for the last decade.

*The number of EPTB cases has decreased in the natives, especially in HIV patients, whereas the number of EPTB immigrant cases has remained stable.

* Male gender, younger age and positive acid-fast-bacilli smears occurred at a significantly higher proportion in HIV co-infected patients compared to the HIV-negative patients.

*EPTB immigrant cases occur at a younger age than it does in native-born patients.