

P0163

Paper Poster Session

Pathology, diversity and clinical outcome in TB

Estimation of tuberculosis incidence at prisons from Colombia, 2007-2013

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Background: Whilst tuberculosis (TB) in prisoners has been well documented in other regions, there is a paucity of information about TB incidence among prisoners in many countries in Latin America, including Colombia.

Material/methods: Current observational, retrospective study aimed to estimate incidences of TB in Colombia for the years 2007-2013 based on data extracted from the surveillance system (SIVIGILA) and the personal health records system (Registro Individual de Prestación de Servicios, RIPS), using the events codes (810, 820 and 825) and the ICD-10 codes A15-A19. Using health coverage population by both system, estimates of adjusted incidence rates were estimated (cases/100,000pop in prisons).

Results: During the period, a median of 391 cumulated cases were reported (range 285-496), for a crude national rate of 12.9 cases/1000 prisoners (95%CI 11.6-14.2; range 4.9-191.4) (in general population this was 1.28 cases/1000 pop [95%CI 1.27-1.29]) (OR=10.18 [95%CI 9.21-11.25]); 64.1% corresponded to male (95%CI 59.3-69.1, range 59.7-71.9); 59.3% were 20-49.999 year-old. At departments, median rates ranged 2.4 (Cauca) to 500.0 cases/1000 prisoners (San Andrés Archipelago).

Conclusions: Previous local and international studies in specific prisons have reported differences in TB incidence rates between 3.19 (Risaralda, Colombia) and 53.4 (Antioquia, Colombia) higher in prisoners compared to general population. In this study TB was significantly 10 times higher in prisoners than in general population. Incarceration is a strong risk factor for acquiring TB, which is interlinked with multiple factors (eg. overcrowding). Policies and programs aimed at reducing transmission and preventing TB among them are necessary for an integral control TB.