

Understanding Task Force Draft Recommendations

This fact sheet explains the U.S. Preventive Services Task Force's (Task Force) draft recommendation statement on screening for latent tuberculosis infection in adults. It also tells you how you can send comments about the draft recommendation to the Task Force. Comments may be submitted from November 22, 2022, to December 27, 2022. The Task Force welcomes your comments.

Screening for Latent Tuberculosis Infection in Adults

The Task Force issued a **draft recommendation statement** on *Screening for Latent Tuberculosis Infection in Adults*.

The Task Force recommends that people at increased risk for tuberculosis (TB) be screened for latent tuberculosis infection (LTBI).

The recommendation applies to adults who are at increased risk for TB but do not have signs or symptoms of TB.

Facts About Latent Tuberculosis Infection (LTBI) and Screening for LTBI

Tuberculosis is a significant public health concern in the United States. However, not everyone who has TB bacteria in their body gets sick from it or realizes that they have it. When a person is infected with TB bacteria but does not have signs or symptoms, that is called a latent TB infection or LTBI.

People at increased risk for TB infection include those born or who have lived in countries with higher rates of TB. In 2020, Mexico, the Philippines, India, Vietnam, and China were the most common countries of birth among people living in the United States with new cases of TB. Those who live or have lived in certain group settings, like prisons and homeless shelters, are also at increased risk.

There are two ways to screen for LTBI, either with a skin test or a blood test. The tests look to see whether there are TB bacteria in the body. Both tests are safe and effective. If the screening shows that a person has TB bacteria in their body, they will need more clinical tests to rule out active TB and confirm that they have LTBI.

Potential Benefits and Harms of Screening for Latent Tuberculosis Infection

The Task Force found that screening people at increased risk for TB is an effective way to identify those who have LTBI. Screening is important because LTBI does not cause signs or symptoms. If left untreated, some people with LTBI will progress to active TB, which can cause serious health problems and spread to others.

Screening for LTBI is only beneficial if those who screen positive go on to receive needed follow-up care and treatment. For people diagnosed with LTBI, antibiotic treatments can help clear the infection safely and effectively so that it does not progress to active TB.

Screening and treatment for LTBI are unlikely to cause serious harms. Potential serious harms of treatment are rare and could include liver damage, but the benefits of treatment outweigh the potential harms.



What are tuberculosis infection and latent tuberculosis infection?

Tuberculosis is a bacterial infection spread through the air from one person to another that usually affects the lungs.

Latent tuberculosis infection is when a person is infected with the tuberculosis bacteria but does not have any signs or symptoms of the disease.

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The Draft Recommendation on Latent Tuberculosis Infection: What Does It Mean?

Here is the Task Force's draft recommendation on screening for latent tuberculosis infection in adults. It is based on the quality and strength of the evidence about the potential benefits and harms of screening for this purpose. It is also based on the size of the potential benefits and harms. Task Force recommendation grades are explained in the box at the end of this fact sheet.

When the Task Force issues a **B Grade**, it recommends screening because it has more potential benefits than potential harms.

Before you send comments to the Task Force, you may want to read the **draft recommendation statement**. The recommendation statement explains the evidence the Task Force reviewed and how it decided on the grade. An **evidence document** provides more detail about the scientific studies the Task Force reviewed.

1 The USPSTF recommends **screening** for **latent tuberculosis infection (LTBI)** in populations **at increased risk**. **B Grade**

Notes

1 screening
A skin test or a blood test to detect TB bacteria.

latent tuberculosis infection

When a person is infected with TB bacteria but does not have any signs or symptoms.

at increased risk

People who were born in or who lived in countries with higher rates of TB or who have lived in certain group settings, like prisons or homeless shelters.

Screening for Latent Tuberculosis Infection in Adults





What is the U.S. Preventive Services Task Force?

The Task Force is an independent, non-federal, volunteer group of national experts in prevention and evidence-based medicine. The Task Force works to improve the health of people nationwide by making evidence-based recommendations about clinical preventive services, such as screenings, counseling services, and preventive medicines. The recommendations apply to people with no signs or symptoms of the disease being discussed.

To develop a recommendation statement, Task Force members consider the best available science and research on a topic. For each topic, the Task Force posts draft documents for public comment, including a **draft recommendation statement**. All comments are reviewed and considered in developing the final recommendation statement. To learn more, visit the **Task Force website**.

USPSTF Recommendation Grades	
Grade	Definition
A	Recommended.
B	Recommended.
C	Recommendation depends on the patient's situation.
D	Not recommended.
I statement	There is not enough evidence to make a recommendation.

[Click Here to Learn More About Tuberculosis](#)

-  **Tuberculosis**
(National Institute of Allergy and Infection Diseases)
-  **Basic TB Facts**
(Centers for Disease Control and Prevention)
-  **The Difference Between Latent TB Infection and TB Disease**
(Centers for Disease Control and Prevention)
-  **Tuberculosis Screening**
(MedlinePlus)

[Click Here to Comment on the Draft Recommendation](#)



The Task Force welcomes comments on this draft recommendation.



Comments must be received between November 22, 2022, and December 27, 2022.



All comments will be considered for use in writing final recommendations.