

U.S. Preventive Services Task Force Recommends Screening for Latent Tuberculosis Infection in Adults at Increased Risk

Task Force found that screening can detect asymptomatic tuberculosis disease and treatments can prevent its progression to active tuberculosis disease

WASHINGTON, D.C. – September 6, 2016 – The U.S. Preventive Services Task Force (Task Force) today published a final recommendation statement on screening for latent tuberculosis infection (LTBI) and recommends screening among adults who are at increased risk but do not have symptoms of tuberculosis (TB). This is a **B recommendation**.

TB infection is one of the most common infectious diseases in the world. Although TB is less common in the United States than in many other nations, thousands of people still become infected every year and are at risk of getting sick and spreading the infection to others.

"The Task Force recommends that primary care clinicians screen adults at increased risk for LTBI to help prevent the progression to active TB," says Task Force member Francisco García, M.D., M.P.H. "TB is a highly contagious, devastating disease. The best approach to prevention is identifying those populations at high risk for exposure as well as those individuals whose underlying medical disease may make them more susceptible to TB infection."

Grade in this recommendation:

B: Recommended.

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Infection is caused by TB bacteria that are spread through the air when a person with active TB coughs or sneezes.

People who are at increased risk for LTBI include people who were born in or who have lived in countries with a high prevalence of TB, including Mexico, the Philippines, Vietnam, India, China, Haiti, and Guatemala. Also, people who have lived in group settings where exposure to TB is more likely, such as homeless shelters or correctional facilities, are considered at increased risk for LTBI.

"The Task Force found that there are effective screening tests that can detect latent TB infection, and there are effective treatments to prevent people from progressing from latent TB infection to active TB disease," explains Task Force Chair Kirsten Bibbins-Domingo, Ph.D., M.D.

The Task Force's final recommendation statement has been published online in *JAMA*, as well as on the Task Force Web site at www.uspreventiveservicestaskforce.org. A draft recommendation was available for public comment from March 8 to April 4, 2016.

The Task Force is an independent, volunteer panel of national experts in prevention and evidence-based medicine that works to improve the health of all Americans by making evidence-based recommendations about clinical preventive services such as screenings, counseling services, and preventive medications.

Dr. García is the director and chief medical officer of the Pima County Department of Health in Tucson, AZ, and the distinguished outreach professor of public health at the University of Arizona.

Dr. Bibbins-Domingo is the Lee Goldman, MD, endowed chair in medicine and professor of medicine and of epidemiology and biostatistics at the University of California, San Francisco (UCSF). She is a general internist, attending physician, and the director of the UCSF Center for Vulnerable Populations at Zuckerberg San Francisco General Hospital.

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