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Session: Tuberculosis & Other Mycobacterial Infections

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Room: Poster & Exhibition Area

Analysis of surveillance data of revised national tuberculosis control programme of Kangra, Himachal Pradesh

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Background: The annual risk of tuberculosis infection is 1.9% in Himachal Pradesh against a national average of 1%. Revised National Tuberculosis Control Programme (RNTCP) in Kangra was introduced in October, 1998. We analyzed the five year (2001-2005) RNTCP surveillance data from Kangra to evaluate the performance of the programme.

Methods: We collected data from all the five tuberculosis units the district. We calculated the following indicators-Case detection rate, tuberculosis cases by category-New smear positive (or smear negative but seriously ill) defaulters, relapses and failures, extra-pulmonary and new smear negative cases. We compared the results with Himachal Pradesh and India. We employed the standardized programme indicators-sputum positivity, cure, death, failure and default rates.

Results: Extra pulmonary cases ranged in between 56-73%, normal being 15-20%. The highest Category-1 varies from 42%-48%. New smear positive case detection rates (78%-90%) and cure rates (88%-91%) were the highest as compared to figures of the state and country. Failure rate was maximum in Kangra TU-6.5% and the default rate was 7.2% in TU Palampur. The tuberculosis cases have fallen down from 6462/lac in 1999 to 2195/lac in 2005 following the introduction of RNTCP in 1999. Age specific (15-55 years) and sex wise males were more affected than the females (59%-64%)

Conclusion: Continue investment in the programme to sustain progress achieved. Investigate the cause of high proportion of extra-pulmonary tuberculosis. Investigate Kangra TU unit with a high default rate.

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Is Leprosy really eliminated or is it still a distant dream?

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Background: The global registered prevalence of Hansen's disease at the beginning of 2011 stood at 192,246 cases. The number of new cases detected during 2010 was 228,474(excluding the small number of cases in Europe). Access to information, diagnosis and

Although leprosy is eliminated from India, pockets of high endemicity still exist in some areas.

Methods: It's a retrospective study which included all the new cases of Leprosy registered at Dept. of Dermatology, Kasturba Medical College, Manipal, Manipal University, India from 2009 to 2011. Details regarding age of onset, sex, clinical spectrum and slit skin smear examination for AFB were noted.

Results: Of the 154 newly diagnosed cases of Leprosy, the most common clinical type of leprosy was Borderline Tuberculoid(BT)- 55 cases (36%) followed by Pure Neuritic Leprosy (PNL) - 32cases(21%), Lepromatous Leprosy(LL) -29cases, Borderline Leprosy- 27 cases, Tuberculoid Leprosy(TT) -9 cases and one case each of Indeterminate and Mid-borderline leprosy. A total of 46 cases (30%) were smear positive (Multibacillary). 9 cases presented with Type 2 reaction and 7 cases with Type 1 reaction. The number of males (123) were more than females(31) with a ratio of 4:1. It was most commonly seen in middle age with maximum incidence between 31 to 40 years, although disease was also recorded in extremes of age from 9 years to 75 years.

Conclusion: In this era of leprosy elimination, leprosy is not uncommon and physicians especially at primary care level should be aware of this disease entity and be able to diagnose the cases promptly. This helps in reducing misdiagnosis and complications thereby preventing the spread of disease in the community.

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Detection of *Mycobacterium bovis* infection, using the lateral flow technique in small ruminants, kaduna, Nigeria

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Background: Tuberculosis (TB) is an infectious zoonotic disease increasingly causing problem in animals and man. *Mycobacterium bovis* (*M bovis*) is the universal pathogen among Mycobacteria responsible for TB in a wide range of hosts. Nigeria is one of the African countries where bovine tuberculosis is wide spread in both cattle and humans and control is limited.

Methods: Kaduna State is the center for trade in livestock, attracting investors from neighbouring states. The study was conducted on 1010 randomly selected small ruminants in four major slaughter houses and livestock markets within kaduna metropolis, to detect *M bovis* infection. The risk and level of awareness to bovine tuberculosis was assessed. A total of 498 sheep and 512 goats aged <12months to >36months of both sex either for slaughter or for sale were tested using Anigen Rapid Bovine TB Antibody Test (IQRT) which is specific for *M bovis*. A total of 300 questionnaires were randomly distributed to respondents viz the professional butchers, livestock marketers and the general public.

Results: The result showed an overall and individual prevalence of 13.56% (137/1010), and 10.64% (54/498) for sheep, 16.41% (84/512) for goats respectively. the Female had an overall prevalence of 8.8% and an individual prevalence of 14.98% as compared to the male with 4.73% and 11.54% respectively. Among the respon-