

National Overview

- The latest national surveillance data show that TB has reached an all-time low in the United States. In 2012, a total of 9,951 cases* were reported.
- The TB rate declined 6.1 percent from 2011 to 2012, to 3.2 cases per 100,000 population — marking the twentieth consecutive year of declines and the lowest recorded rate since national reporting began in 1953.
- Estimates suggest that TB prevention and control efforts in the United States have helped to prevent more than 200,000 cases since 1993.
- Four states (California, Texas, New York, and Florida) account for approximately half of all TB cases (50 percent or 4,967 cases).

Figure 1. Reported TB Cases in the United States, 1982–2012



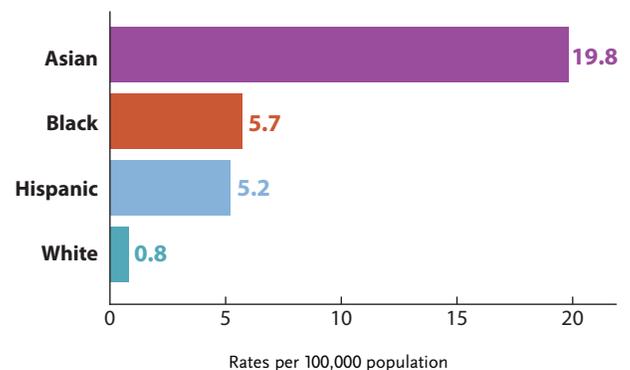
The resurgence of TB in the mid-1980s was marked by several years of increasing case counts until its peak in 1992. Case counts began decreasing again in 1993, and 2012 marks the 20th year of decline in the total number of TB cases reported in the United States since the peak of the resurgence.

Most-Affected Populations

Racial/Ethnic Disparities Persist

- Although TB rates declined among all racial/ethnic groups, TB rates among racial/ethnic minorities are much higher than those of whites. Rates for Asians (19.8/100,000), blacks (5.7), and Hispanics (5.2) were 25, seven, and seven times higher than among whites (0.8), respectively.
- More TB cases are reported among Asians than any other racial/ethnic group (3,043 total cases).

Figure 2. TB Rates by Race/Ethnicity, 2012



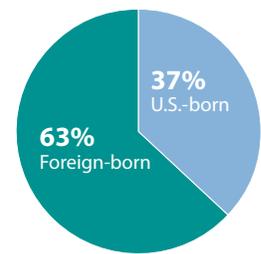
*2012 numbers are based on preliminary data



Foreign-Born Individuals Bear Significant Burden

- Despite declines in the rates of TB among both foreign- and U.S.-born individuals, the TB rate among foreign-born persons (15.8/100,000) was 12 times higher than among U.S.-born persons (1.4).
- Among persons with TB and a known place of birth, approximately 96 percent of Asians, 75 percent of Hispanics, 40 percent of blacks, and 19 percent of whites were foreign born.
- More than half (55 percent) of foreign-born TB patients originated from five countries (Mexico, the Philippines, Vietnam, India, and China).
- CDC officials note that these data underscore the need to address TB as a severe health threat globally. According to the World Health Organization, approximately one-third of the world's population is infected with the bacteria that cause TB; in 2011, approximately 8.7 million people became ill with the disease and an estimated 1.4 million people died. (2012 Global Tuberculosis Control Report, available at <http://www.who.int/tb>)

Figure 3. Proportion of TB Cases by National Origin, 2012



Severe Impact among Other Populations

- **Persons living with HIV:** People living with HIV are at high risk for rapid progression to TB disease once infected and are more likely to die during treatment. In 2012, among persons with TB and a known HIV test result, 8 percent were co-infected with HIV.
- **Homeless:** Those who are homeless are particularly vulnerable to TB; factors such as crowded living situations can increase risk of transmission in this population. In 2012, among persons with TB aged 15 years or older with a known housing status, 6 percent reported being homeless within the past year.

Drug Resistance Remains a Serious Challenge

Multidrug-Resistant TB (MDR TB)

- Cases of multidrug-resistant TB, or MDR TB — defined as TB that is resistant to at least two first-line therapies (isoniazid and rifampin) — are difficult and costly to treat and can be fatal.
- MDR TB accounted for 1.6 percent (127 cases) of all TB cases with drug-susceptibility testing completed in 2011 (the most recent year for which complete drug susceptibility results are available). This represents a slight increase from the previous year in the proportion of cases that were MDR TB (1.3 percent in 2010).

Extensively Drug-Resistant TB (XDR TB)

- Extensively drug-resistant TB, or XDR TB, is defined as TB that is resistant to at least isoniazid and rifampin among first-line anti-TB drugs, resistant to any fluoroquinolone (e.g., ciprofloxacin or ofloxacin), and resistant to at least one second-line injectable drug (e.g., amikacin, capreomycin, or kanamycin).
- XDR TB patients have few treatment options because the drugs that are most highly effective against TB will be ineffective against their disease. This problem is amplified in areas of the world with limited access to the full range of anti-TB drugs.
- One case of XDR TB was reported in the United States in 2012.

If you are a member of the news media and need more information, please visit www.cdc.gov/nchhstp/Newsroom or contact the News Media Line at CDC's National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (404-639-8895 or NCHHSTPMediaTeam@cdc.gov).

Source: CDC. Trends in Tuberculosis — United States, 2012. *MMWR* 22 March 2013.