NYC Health

TB Times

NYC Department of Health and Mental Hygiene, Bureau of Tuberculosis Control

March 24, 2006 World TB Day 2006 Edition

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"We cannot reach these communities without your help…continued efforts are needed toward…eliminating TB in NYC…"

TB Times, Designer/Editor
-Xiomara M. Dorrejo

Moving Towards a Tuberculosis-Free New York City

Director's Statement- Sonal S. Munsiff, MD

It is a historic time for New York City (NYC) Tuberculosis (TB) Control. For the first time EVER, there were fewer than 1000 cases of tuberculosis in NYC in 2005. While this is an all time low, it is not an insignificant number of TB cases. In fact, at 12.3 TB cases per 100,000 population, NYC's TB case rate is more than 2.5 times higher than the overall case rate for the United States, even higher in certain communities.

In order to raise awareness about tuberculosis in high-risk communities and to better serve our patients, the Bureau of TB Control (BTBC) is launching a TB Awareness Campaign on World TB Day, March 24, 2006. The campaign, which has the theme of "*Moving Towards a Tuberculosis-Free New York City*", will combine local media advertising and partnership efforts with medical providers and community based organizations to target US and Non-US born communities living in areas with high rates of TB infection and disease. The campaign will utilize outdoor and print media to increase awareness about TB and encourage high-risk populations to get tested and take advantage of the **free TB services** offered by the NYC DOHMH Chest Centers.

The three-month campaign will target Chinese, Korean, Hispanic, Haitian, South Asian and US born African American communities residing in neighborhoods within Brooklyn (East Flatbush-Flatbush and Bedford Stuyvesant-Crown Heights), Manhattan (Union Square-Lower East Side) and Queens (West Queens and Flushing) These communities were chosen based on the disproportionate number of residents known to have higher rates of TB infection and disease during *2000-2004 (see table).

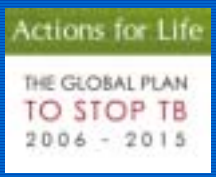
UHF Neighborhood	*Total Cases	Target Communities
West Queens	683	Ecuadorian, Filipino, Mexican, Peruvian, Chinese, Indian, Nepali
East Flatbush-Flatbush	308	Haitian
Bedford Stuyvesant-Crown Heights	288	African-American
Flushing	239	Chinese, South Korean, Indian
Union Square-Lower East Side	191	Chinese, Hispanic

We cannot reach these communities without your help. There are three things you can do to help us move towards elimination of TB in NYC:

1. Increase awareness about TB and the free services available to TB patients in New York City;
2. Detect latent TB infection (LTBI) in high-risk groups;
3. Provide treatment for prevention of active TB disease.

Although the burden of TB is decreasing in NYC, TB remains a serious public health problem. Continued efforts are needed toward the national goal of eliminating TB in NYC and the United States. Thank you for your dedication and contribution towards freeing NYC of TB.

Actions for Life: Towards a World Free of Tuberculosis



World TB Day 2006 in the U.S. & Around the World

CDC

Stop TB Partnership

TB Awareness Campaign, March-June 2006 –*By Xiomara M.Dorrejo*

In an effort to promote the TB awareness campaign, ***"Moving towards a Tuberculosis-Free New York City"***, the BTBC has planned a series of events, during mid-March to June 2006, intended to mobilize high-risk communities, encourage support, expand partnerships, reach out to medical providers serving high risk communities and promote high quality TB control and care. Events and activities surrounding the campaign will include:

- A World TB Day Breakfast Seminar
- Provider and Community Outreach
- TB Information Kit Distribution to NYC Providers
- Revival of the "Coalition for a TB-Free NYC"

World TB Day 2006 Breakfast Seminar

On March 24, 2006, the BTBC hosted a Breakfast Seminar to launch the TB Awareness Campaign and formally announce this year's World TB Day theme, planned activities and the revival of the "Coalition for a TB-Free NYC" (formally known as the NYC TB Coalition Project). The Breakfast Seminar was held at the Nice Restaurant in the Chinatown area. Guests included local media, partners, providers and community based organizations serving high-risk communities. In addition, a Press Release was issued releasing NYC's 2005 TB data and announcing the variety of free TB services offered by DOHMH Chest Centers.

Provider and Community Outreach

The BTBC, in collaboration with community partners, will reach out to targeted high-risk communities and their providers by participating in TB educational sessions, health fairs, community meetings, TB/health screenings and encouraging patient referrals to article 28 facilities, HHC Hospitals, DOHMH Chest Centers and reputable low-cost private physicians.

Provider TB Information Kits

Trained BTBC staff will conduct face-to-face outreach visits to educate providers about the TB Awareness Campaign and promote and distribute BTBC's new provider ***TB Information Kits!*** To assist the BTBC with their outreach efforts, the NYC DOHMH, Public Health Detailing Program provided training to 18 BTBC outreach staff on how to effectively communicate with providers and demonstrated how to use and distribute the kits. The TB Information Kits, containing newly revised, up-to-date provider and patient educational materials, will include:

Provider Educational Materials

- Tuberculosis Services in New York City: a quick guide for health care providers ***Revised***
- QuantiFERON-TB Gold Test Fact Sheet ***NEW!***
- Rapid Diagnostic Tests for Tuberculosis Fact Sheet ***NEW***
- The Mantoux Tuberculin Skin Test: a guide for providers ***Revised***
- Tuberculosis (TB) Screening Form ***NEW for Patients!***

Patient & General Public Educational Materials

- Learn About Tuberculosis: What Everyone Should Know ***NEW!***
- Friends Forever: A Triumph Over Tuberculosis ***NEW TB Comic Book!***

Provider Brochure Has a New Look!-*By Martha Alexander*

The TB Services for Health Care Provider Brochure has been revised and redesigned into a colorful, concise and comprehensive guide that updates providers on current DOHMH reporting requirements and TB support services available at no cost. "Tuberculosis Services in New York City: a quick guide for health care providers" discusses the changing TB profile in New York City, provides details on how and when to report suspected and confirmed cases of TB, encourages patient referral to DOHMH's state-of-the-art Chest Centers and provides information on available training opportunities and educational materials. It also highlights the different ways providers can obtain additional information: 311, www.nyc.gov/health/tb or the newly consolidated TB Provider Hotline (212-788-4162) used to report cases, refer patients and request support services.

A Look at BTBC's New Patient Education Materials

Coming Soon In...

- Arabic
- Bengali
- Chinese
- Haitain/Creole
- French
- Hindi
- Korean
- Russian
- Spanish
- Urdu

"The TB Comic Book" Coming Soon in Spanish

Call 311 to Order BTBC and DOHMH Publications

A Look at CDC's New Patient Education Materials

New TB Patient Education Materials Finally Here!

-By Martha Alexander, MHS

BTBC's Patient Brochures Combined into One!

Wondering what ever happened to What You Need to Know About TB, Stop TB and Contact With TB? Well if you must know…the BTBC has combined the best of these brochures into one easy-to-use brochure.

Learn about Tuberculosis: What Everyone Should Know is a helpful and comprehensive brochure designed to answer any questions that a patient might have after being diagnosed with TB or LTBI. It describes what is TB, how it is spread and clarifies the differences between TB and LTBI. It also explains how to test for TB and how to interpret the results. It gives tips for staying on schedule with medication, promotes directly observed therapy, explains what to do if you are a contact to a TB case, and provides patients with ways to contact the BTBC's Chest Centers to obtain additional information.

How to Use the New Patient Brochure

The brochure should be given to every TB patient or suspect who is interviewed by field or clinic case managers. In addition, it should be given to every new person identified with LTBI in our chest centers. Chest Center physicians and nurses can reiterate the messages presented in this brochure. It will also be our main publication to give to anyone who wants information about TB or LTBI. It will soon be available in several languages. Until all the translations are available, we will continue offering our current brochures in translation (Stop TB, Contact with TB, and What You Need to Know about TB.) Many CBOs and private providers will receive the brochure as part of the BTBC's outreach activities.

New CDC Patient Education Materials-*By Martha Alexander, MHS*

The Centers for Disease Control and Prevention has developed new, low-literacy patient education materials for patients and the general public that discusses basics about the diagnosis, prevention and treatment of TB disease (Spanish-language versions will be available soon):

What You Need to Know About the TB Skin Test

Is a one-page guide that discusses why patients should get tested, how to care for the test, and what the results mean. It stresses the importance of returning in 2-3 days to have the test read, and mentions that many people have to be tested twice to get accurate results. It also explains that even BCG-vaccinated patients should be tested for TB.

Get the Facts About TB Disease & Staying on Track with TB Medicine

Get the Facts describes how TB is spread, explains the basics of treatment, and includes a section on how to explain TB to your family. It would be appropriate for any patient with active TB. ***Staying on Track*** gives tips for staying on track with medication that would be especially useful for patients on self-administered therapy. It also emphasizes the importance of reporting side effects to the doctor.

What You Need to Know About TB Infection can help LTBI patients protect their health and prevent progression to TB disease. ***Take Steps to Control TB When You Have HIV*** stresses that testing and treatment for LTBI or TB are essential lifesaving measures for patients who have HIV.

Protect Your Family and Friends from TB: The TB Contact Investigation

explains that anyone can get TB, and that those who do should protect their friends and families by helping health care workers with the TB contact investigation. It assures the patient of confidentiality in the investigation. A patient can share this brochure with his/her contacts to help them understand why they should get tested.

Learn More about the Treatment Action Group

TAG's TB/HIV Project was established to combat TB/HIV co-infection through a combination of community-based advocacy, education and mobilization efforts involving AIDS advocates in developed and developing countries.

Partner Testimonial

"The networking opportunities have been invaluable to [the Center for Immigrant Health]. Our entire immigrant tuberculosis health beliefs resulted from…the Coalition Meetings."

-Francesca Gany, MD, MS

The New "Coalition for a TB-Free NYC"

-By Shama Ahuja, MPH

On World TB Day, the revival of the **"Coalition for a TB-Free NYC"** (formally known as the NYC TB coalition project) was announced by the newly appointed chairperson, Javid Syed, MPH, the TB/HIV Project Director for the Treatment Action Group (TAG).

Concern

Despite our efforts, TB is still not yet a disease of the past. NYC has nearly 1000 new TB cases each year. People from immigrant communities, the homeless and HIV-infected individuals are among those most affected by the disease. Over the last eight years we have seen a predominance of non-US born TB cases, approximately 70% in 2005, in NYC. In addition, the case rate among US born non-Hispanic blacks was 17.1 per 100,000, three and a half times the national case rate. We are particularly concerned about a lack of awareness among these at-risk populations of symptoms and risk factors for TB. In addition, diagnosis of active and latent TB still remains difficult. However, recent innovations may soon offer us better diagnostic tests.

Response

The coalition is **seeking partners** who are willing to work with us to develop and implement programs that will reduce the suffering caused by TB in New York City. With the support of partners who are recognized experts in the field of TB elimination, respected leaders of at-risk populations, health care providers, faith-based organizations, schools of public health, professional associations, and business or community-based organizations, we can make a difference. Specifically, we want to improve knowledge of TB in at risk communities, broaden provider knowledge about new TB diagnostic tests and improve utilization of these tests and advocate for more research and funding for TB.

Partnership Participation

As partners, we bring a variety of skills, experiences, and perspectives to the table. We value each other's perceptions, and we are committed to working cooperatively to reduce TB in high-risk populations and ultimately, eliminate TB in New York City. We will regularly evaluate our efforts and our outcomes. We create and serve on working groups as needed to accomplish our goals and objectives.

The initial goals of the coalition are to:

1. Build up the coalition by soliciting members;
2. Develop a strong educational component for the coalition;
3. Explore the potential to do a legislative educational visit with **RESULTS, International,** a nonprofit grassroots advocacy organization, committed to creating the political will to end hunger and the worst aspects of poverty. RESULTS is committed to individuals exercising their personal and political power by lobbying elected officials for effective solutions and key policies that affect hunger and poverty.

The Bureau of TB Control is thrilled to be a partner in this new and improved coalition. If you would like to **join us in our efforts towards a TB-free NYC**, please contact Javid Syed at 212-253-7922.

Center for Immigrant Health

The Center for Immigrant Health's mission is to facilitate the delivery of linguistically, culturally, and epidemiologically sensitive healthcare services to newcomer populations. The Center strives for the elimination of ethnic and racial disparities in healthcare.

We accomplish our mission through research, outreach and education, information dissemination, and program and policy development.

Contact Us

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Center for Immigrant Health's School Intervention Program

By Francesca Gany, MD, MS- CIH Chair/ExecutiveDirector

In 2000, with funding from the New York City Department of Health and Mental Hygiene, Bureau of TB Control, the Center for Immigrant Health, NYU School of Medicine, initiated a tuberculosis School Intervention Program (SIP) in two New York City high schools with diverse immigrant student bodies. SIP has since grown to include 7 schools, with an additional 5 schools to be added next academic year.

What We Do

SIP conducts targeted testing of high-risk adolescents; provides diagnostic and treatment referrals for tuberculin skin test-positive students; and facilitates latent tuberculosis treatment adherence through culturally and linguistically tailored case management and incentives, and through Directly Observed Therapy.

Who We Target

SIP targets schools with either all new immigrant populations or with a majority of new immigrant students from high risk countries. In addition to this requirement, the school must have ample space, to allow privacy in the encounters with students, and a willingness to become a part of the program, which includes facilitating contact with students. Participant schools include Newcomers H.S., Brooklyn International H.S., Liberty H.S., Flushing International H.S., Gregorio Luperon H.S., Norman Thomas H.S., Manhattan Comprehensive H.S., and Prospect Heights H.S. *(occasionally).*

SIP Requirements

The NYC Department of Health and Mental Hygiene requires that any child or individual entering a NYC Secondary School (any Intermediate, Junior, Middle or High School) for the first time have a Mantoux Tuberculin Skin Test, with a documented reading date, within 14 days of new student enrollment. All enrolling students have their skin test records checked by a SIP caseworker. If there was no test on record, the caseworker obtains parental consent, screens the student, and administers a demographic and health questionnaire, focusing on tuberculosis risk factors.

SIP TB Services

Each tuberculin skin test-positive student (induration >10mm) without previous treatment completion is referred for further evaluation. Most are seen at a NYC Department of Health and Mental Hygiene Chest Centers, where they receive free evaluations and follow-up care. All students placed on isoniazid receive, in their languages, either twice weekly Directly Observed Therapy or SIP case management, consisting of biweekly telephone calls or in-person contact; at least monthly telephone parental contact to assess adherence and address concerns; incentives(movie tickets, phone cards, or grocery coupons) at months three, six, and nine; and MetroCards to cover transportation.

Tracking Referral Sources of Chest Center Patients

-By Marie Dorsinville, RN, MPH

Soon, there will be a new referral screen implemented in the BTBC's "Digital Clinic" that **must** be completed for every new patient. Some fields within this screen are mandatory and staff will not be able to proceed with registration unless the required fields are completed. This new screen will include information regarding referrals from outside providers as well as referrals made by the Chest Centers. Advantages of this referral screen include:

- Ability to monitor the number of patient referrals
- Obtains automated reports about various types of referrals
- Ability to automatically generate reports of patient evaluation to providers

Knowing our referral base will allow us to better serve our referral sources and our patients.