SPOTLIGHT ON LATENT TUBERCULOSIS INFECTION SCREENING FOR JUVENILE IDIOPATHIC ARTHRITIS IN TWO COUNTRIES, COMPARING HIGH AND LOW RISK PATIENTS

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BACKGROUND

Rheumatic diseases are associated with an increase in overall risks of tuberculosis (TB). The aim of this study was to evaluate the prevalence of TB and the value of screening latent TB infection (LTBI), in clinical practice for juvenile idiopathic arthritis (JIA) patients from high and low TB incidence endemic countries.

METHODS

This is an international, multicenter, observational, cross-sectional study of data collection from Brazil and Portugal Registry at REUMA.PT. The inclusion criteria were patients age ≤ 18 years who underwent screening for *Mycobacterium tuberculosis* infection (tuberculin skin test [TST] and/or interferon gamma release assay [IGRA]). Chest X-rays and history of exposure to TB were also assessed.

RESULTS

A total of 292 JIA patients were included; mean age 14.3 years, mean disease duration 7.5 years; 194 patients (66.4%) performed only TST, 14 (4.8%) only IGRA and 84 (28.8%) both. The frequency of LTBI (10.6%) and TB was similar between the two countries. The reasons for TB screening were different; in Brazil it was performed more often at JIA onset while in Portugal it was performed when starting disease modified antirheumatic drugs (DMARDs) treatment ($p < 0.001$). Isoniazid therapy was prescribed in 40 (13.7%) patients (31 with LTBI and 9 with epidemiologic risks and/or due to contact with sick people). Only 3 patients (1%) developed active TB.

CONCLUSION

We found nearly 10% of patients with LTBI, a small percentage of patients with treatment due to epidemiologic risks and only 1% active TB. Distinct reasons and screening methods for LTBI were observed between the two countries.

KEYWORDS

Tuberculosis, Latent tuberculosis infection, Juvenile idiopathic arthritis, Children, Rheumatic Diseases.