
Tuberculosis Outbreak in Thunder Bay

In follow up to our previous communication in June 2019, the Thunder Bay District Health Unit is advising that a **tuberculosis (TB) outbreak is still ongoing in the city of Thunder Bay**. The outbreak was declared in March 2018.

Mycobacterium tuberculosis is transmitted via airborne particles from individuals with active respiratory TB, but **is not highly contagious**. *M. tuberculosis* may result in asymptomatic, latent TB infection (LTBI) or symptomatic, active TB disease. LTBI is typically diagnosed via tuberculin skin testing (Mantoux test). LTBI is not contagious, but approximately 10% of people with LTBI will develop active disease sometime in their lives.

TBDHU has identified **1 additional case of active TB related to the outbreak in 2020**, bringing the total number of active cases associated with this outbreak to 14. Contact tracing efforts have identified **an additional 31 latent tuberculosis infections** associated with the outbreak. All of the cases are experiencing homelessness, precariously housed, or living in social housing, or close friends or family of individuals who are under-housed. **Individuals affected by this outbreak are young**, ranging in age from 20 to 50 years old. The Thunder Bay District Health Unit has identified and is following up with individuals who may have been exposed to TB.

There are likely further cases that have not yet been diagnosed. TB testing rates and health services in Thunder Bay have largely dropped in 2020 due to COVID-19 closures and restrictions. The TBDHU is conducting case and contact management and looking to expand testing.

In response to this ongoing outbreak, the TBDHU would appreciate your assistance with the following:

- **Maintain a high index of suspicion** for TB in patients who are street-involved, homeless, or under-housed. Respiratory TB may present with new cough, chest pain, lymphadenopathy, hemoptysis, weight loss, fever, or night sweats. Be aware of extrapulmonary presentations of TB, for example, TB lymphadenitis, osteoarticular TB, meningitis, and pericarditis.
- **Obtain imaging and sputum samples for diagnosis if you suspect or want to rule out active respiratory TB.** Tuberculin skin testing (TST) does not have a role in the diagnosis of active disease. TST may be falsely negative with active disease.
- Under Ontario Regulation 135/18 of the *Health Protection and Promotion Act*, **report all confirmed and suspected cases of active TB, and all cases of LTBI** to the TBDHU Infectious Disease Program (625-5900 or 1-888-294-6630). The LTBI reporting form is available at <https://www.tbdhu.com/resource/tuberculosis-skin-test-reporting-form>
- Employ infection prevention and control procedures when examining patients who may have active TB. Active respiratory TB, including pulmonary and laryngeal TB, **requires airborne precautions, including fit-tested N95 respirators for healthcare providers.**

For more information, see: <https://www.tbdhu.com/professionals/health-care-providers/infectious-diseases-toolkit/tuberculosis>

Questions? Please contact the TBDHU Infectious Disease Program at 625-5900 or 1-888-294-6630.