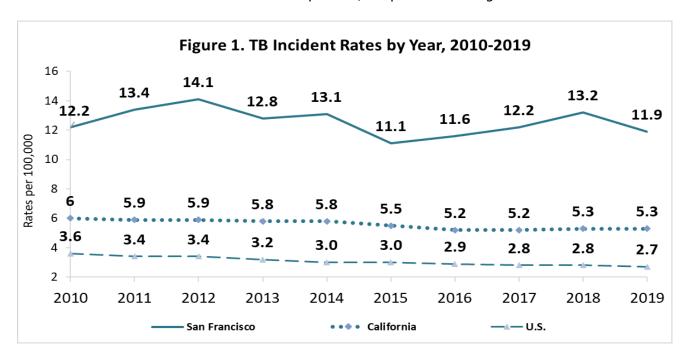


Tuberculosis in City and County of San Francisco, 2019

The mission of San Francisco Tuberculosis Prevention and Control Program is to control, prevent, and finally eliminate tuberculosis in San Francisco by providing compassionate, equitable, and supportive care of the highest quality to all persons affected by this disease.

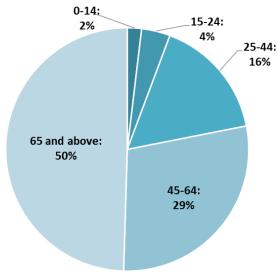
In 2019, 105 new cases with active tuberculosis (TB) were reported in San Francisco (11.9 TB cases per 100,000 persons). This is an 11% decrease from 2018 (118 cases, at 13.2 cases per 100,000 persons). The rate of TB in San Francisco is more than four times the national rate of 2.8 cases per 100,000 persons and more than twice the California rate of 5.3 cases per 100,000 persons. *See Figure 1*.



Demographics

In 2019, 69 out of 105 active TB cases (65.7%) identified were males. The median ages of TB patients in San Francisco were 58 in 2016, 60 in 2017, and 64 in 2018 and 2019. Two pediatric cases (0-14 years old) were reported and approximately 50% active TB cases were ages 65 and older. See Figure 2.

Figure 2. TB Cases by Age Group, 2019



POPULATION HEALTH DIVISION

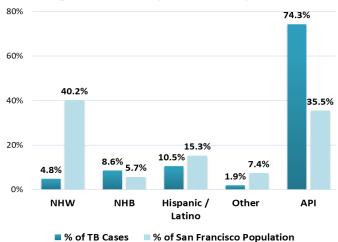
SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH



Tuberculosis in City and County of San Francisco, 2019

The largest proportion of TB cases reported in 2019 was Asian and Pacific Islander (API). The proportions of cases for API, Hispanic / Latino, and Non-Hispanic Black (NHB) groups were higher than that of the Non-Hispanic White (NHW) group. See Figure 3.

Figure 3. TB Cases by Race / Ethnicity, 2019



The national origin of persons with TB disease was diversely represented. *See Figure 4.*

Figure 4. TB Cases by Countries / Regions of Birth, 2019



Other countries / regions of birth include Burma, El Salvador, Eritrea, Ethiopia, Ghana, Hong Kong, India, Macau, Malaysia, Mongolia, Nepal, Nicaragua, North Korea, Pakistan, South Korea, and Taiwan.

Site of Disease

Among 105 TB cases reported in 2019, 87 had pulmonary TB disease, 8 had pleural TB disease, and 5 had pulmonary and pleural TB. Other sites of disease including lymphatic (axillary, cervical, and/or intrathoracic), peritoneal, bone or joint, meningeal, and genitourinary.

Comorbidity

Three cases (2.9%) were HIV positive. While there was a decline in HIV co-infection among persons diagnosed with TB, other important comorbid conditions remained prevalent in San Francisco. Twenty-three cases (21.9%) had diabetes mellitus, 8 cases (7.6%) had chronic renal disease, and 13 cases (12.4%) had immunosuppression.

Mortality

At the time of this publication, there were 11 deaths among persons diagnosed with TB in 2019 (10.5% mortality). One case died before being able to receive TB treatment and four deaths were directly related to TB disease.

TB Drug Resistance

Eight cases were mono-resistant to TB drug Isoniazid (INH), and 1 case was mono-resistant to TB drug Pyrazinamide (PZA). No cases of multidrug resistant TB (MDR-TB) were reported in 2019.