



## News Release

### **TB rates in PHE South Midlands and Hertfordshire lower than national average**

New figures show that 319 cases of tuberculosis (TB) were reported in Public Health England's (PHE), South Midlands and Hertfordshire Centre (Northamptonshire, Bedfordshire, Hertfordshire and Milton Keynes) in 2012, compared to 348 cases reported in 2011. The figures are published in PHE's annual "TB in the UK: 2013 report" published today (Wednesday).

Rates of TB have stabilised nationally at around 14 cases per 100,000 since the mid-2000s, following the increase in incidence seen in the previous two decades. However, despite considerable efforts to improve prevention, treatment and control, TB incidence in the UK remains high compared to most other Western European countries.

The three yearly average rate (2010-2012) of TB for PHE South Midlands and Hertfordshire was 12 cases per 100,000 in 2012. The use of a three yearly average rate enables an understanding of the rate trend in a way that is less susceptible to potentially inconsistent yearly fluctuation.

Nationally London continued to carry the burden of infection in 2012, with 3,426 cases accounting for almost 40 per cent of the UK total, followed by the West Midlands with 12 per cent. As in previous years, almost three quarters of cases were in people born in countries where TB is more common. Of those born abroad, the majority of cases were from South Asia (60 per cent) and sub-Saharan Africa (22 per cent).

In the UK-born population, those most at risk remain individuals from ethnic minority groups, those with social risk factors such as a history of homelessness, imprisonment or problem use of drugs or alcohol, and the elderly.

Dr Jenifer Smith, Centre Director, PHE South Midlands and Hertfordshire Centre, said: "TB is a preventable and treatable condition, but, if left untreated, can be life threatening. The reduction in TB in this area is good to see, but there remain some areas with a comparatively high incidence. It is important we maintain our efforts to reduce this disease in those areas where people are most at risk. Early diagnosis and appropriate treatment are key to reducing TB levels in the UK so we encourage local health service commissioners to prioritise the delivery of appropriate clinical and public health services for TB, especially in areas where TB rates are highest."

“To reduce the risk of active TB disease in people coming to the UK from high incidence countries, it is essential that new migrants have good access to screening and diagnostic services. Ensuring that NICE recommendations on screening for latent TB infection are implemented in a coordinated manner across the country is therefore very important.”

Dr Paul Cosford, Director for Health Protection and Medical Director at PHE, said: “TB remains an important public health problem, particularly in London and among people from vulnerable communities. We have therefore made TB one of the key priorities for PHE and are working with key stakeholders to oversee the development of a stronger national approach to TB control.

“This will have at its heart support to local clinical, preventive and social care services in the NHS, local government and wider health and social care system. We are determined to see a sustained reduction in TB, and will work tirelessly to support local partners in those areas where the burden is greatest.”

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**Notes to editors:**

1. TB is an infection caused by bacteria. It usually affects the lungs, but can affect other parts of the body. TB is transmitted when someone who has the infection coughs or sneezes, but it requires close prolonged contact in order to spread from person to person. For more information about tuberculosis, please visit: <http://www.hpa.org.uk/Topics/InfectiousDiseases/InfectionsAZ/Tuberculosis/>
2. Public Health England’s mission is to protect and improve the nation’s health and to address inequalities through working with national and local government, the NHS, industry and the voluntary and community sector. PHE is an operationally autonomous executive agency of the Department of Health.

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