Migration Flows and Increase of Extrapulmonary Tuberculosis in a Low Prevalence Setting: a Retrospective Analysis in Two Italian Centres

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Results

171 patients were enrolled from 2013 to 2017 in two Italian centers (Rome and Terni). 70.8% were males, with a mean age of 40.8 years. The number of TB diagnosis increased along the study period (6.8% in 2013 vs 10.5% in 2017) with a reduction of pulmonary TB (76.5% in 2013 vs 60.7% in 2017) and an increase of EPTB (23.5% in 2013 vs 39.3% in 2017).

PT was documented in 103 patients (60%) while 68 patients were diagnosed with EPTB (40%). Most commonly sites of EPTB involvement were lymph nodes (33.8%), followed by bones/joints (20.5%), bowel (11.7%), and other sites localizations (33.9%).

Among the individuals with TB an increase in the percentage of Africans was seen, consistent with an increasing flow of migrants starting from 2015. EPTB patients were younger than patients with PT, usually coming from Extra-European regions, mainly from the African country, furthermore they were considered otherwise healthy in the majority of cases. Immunodepression as the main risk factor for EPTB has been replaced by immigration from TB-endemic areas.

Background

Extrapulmonary tuberculosis (EPTB) represents 25% of worldwide tuberculosis (TB) and is more commonly associated with immunodepression. The purpose of this study was to determine the burden of EPTB in a low TB prevalence setting.

Materials and methods

We carried out a retrospective evaluation of patients treated for TB from 2013 to 2017. Demographic data, clinical charts, comorbidities, laboratory tests and radiologic findings were reviewed and analysed. Data were elaborated using Yates’ method analysis, Fisher test and Pearson’s Chi-squared test. Confidence interval was set at 95% and level of statistical significance was set at p<0.05

Conclusions

From 2013 to 2017 there has been an increase in TB diagnoses. The epidemiology is deeply influenced by migration and the doubled risk of EPTB in 2015-2017 was likely the consequence of the ongoing escalating levels of migration, mainly from TB high endemic countries and may result as an emerging public health problem.