Challenges of Completing Treatment for LTBI in a Rural Hispanic Community

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Cases and Contacts

<table>
<thead>
<tr>
<th>Cases</th>
<th>Demographics</th>
<th>Close Contacts</th>
</tr>
</thead>
<tbody>
<tr>
<td># 1</td>
<td>24 year old Hispanic female, bilateral cavitary disease, AFB smear +, Sharing trailer with another migrant family</td>
<td>All PPD positive 3 adults 3 children ages 8 mo, 2 yrs, 2 yrs</td>
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<tr>
<td># 2</td>
<td>8 month old household contact (dx. in hospital)</td>
<td>Same as above</td>
</tr>
<tr>
<td># 3</td>
<td>27 year old, smear -, culture +, resistant I/E</td>
<td>one new adult contact (+PPD), plus 4 children (one 9 days old), all PPD neg.</td>
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Challenges Presented to LHD (1)

Hospital
• Misinformation from physician to patient
• Lack of education on TB disease
• Inadequate use of interpreters
• Inadequate use of isolation
• Patient depression
Household

- Index patient could not remain in single family trailer while infectious
- Pt’s spouse not allowed time off from work to help with children
- Prohibited from taking children for follow up after + PPD
- Prohibited from shopping for food, baby formula, diapers
- Spouse increased alcohol use

Workplace

- TST testing skills of staff
- Additional interpreters needed
- Buy-in from packing house management
- Contacts:
  - Multiple names (naming systems or aliases)
  - Inaccurate DOB
  - Unknown addresses

Workplace Investigation

160 Contacts

- Tomato packing house
- Long shifts
- Multiple assembly processing lines
- Common eating area
- Only one line-worker English proficient
- Multiple Spanish dialects-incl. Mixteco
Who are the Mixteco?

- Mixtec Indians from southern Mexican state of Oaxaca
- Farm work in US has become a primary industry, supporting entire villages and paying for schools, roads and piped water
- Little experience with modern medical system
- May still use traditional healers

Workplace Investigation

- All testing / medical reviews done outside
- Management mandated that all employees continue work schedules
- 160 PPDs read on one day
- All patients assigned an identifier as their names often change

Results of Contact Investigation

- 81 Positive PPDs
- All contacts asked to bring their PPD card for identification
- 2 symptomatic individuals taken immediately for CXRs
- Symptomatic employees restricted from work and employer notified
- 4 of 81 employees were pregnant at the time
- 6 of 81 did not come back to work for other reasons – unable to locate
Ensuring Adherence: Taking Our Staff to the People

- All eligible contacts accepted treatment
- Interviews and counseling done for 71 contacts
- Time management critical
- Mini charts made for each patient
- Blood drawn for HIV / Syphilis / LFTs
- Lengthiness of interviews / paperwork
- Lab set up outside
- Some interviews done at SCHD with language-line for non-Spanish speaking Mixtecos

Ensuring Adherence: Mobilizing the Clinic

- Use of office space as a medical office
  - stretcher and supplies brought in
  - stations set up with RN and interpreter
  - Pregnancy tests & vital signs prior to exam
- Tried to ensure patient confidentiality to increase patient trust
- Education materials geared to other culture, low literacy population
Ensuring Adherence: Pushing Prevention

- Used shorter course Rifampin tx. with men
- Monthly visits to packing house during lunch
- PHENOMENAL Interpreter – already had established relationship with patients
- Provided other medical and case management services at each interaction
- Re-educated at every visit and problem-solved with difficulties in taking meds
Final Analysis

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<tbody>
<tr>
<td>No. tested</td>
<td>160</td>
</tr>
<tr>
<td>No. (%) TST+</td>
<td>81</td>
</tr>
<tr>
<td>(51%)</td>
<td></td>
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<tr>
<td>No. (%) eligible for LTBI Tx</td>
<td>69</td>
</tr>
<tr>
<td>(85%)</td>
<td></td>
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<tr>
<td>No. (%) comp. LTBI Tx</td>
<td>43</td>
</tr>
<tr>
<td>(62%)</td>
<td></td>
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<tr>
<td>No. (%) with some protection</td>
<td>13</td>
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<tr>
<td>(6 women &gt; 7 mos INH, 7 men &gt; 3 mos Rif)</td>
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<td>(19%)</td>
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<tr>
<td>Did not complete</td>
<td>13</td>
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<tr>
<td>(MD stopped Tx due to side adverse reactions, refused, became pregnant, moved back to Mexico, lost)</td>
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<tr>
<td>(19%)</td>
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Lessons Learned

• New TB case diagnosed May 2006, reinforcing need for screening of new employees

• High rates of completion can be achieved if you work with people

• Remember, some protection is better than none

• DOPT would be great!

Contact Information

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