



# TB Times

## Mayo Clinic Center for Tuberculosis (MCCT)

### UPCOMING EVENTS

Select links for  
details

#### [Innovations in TB Series](#)

##### **Class 5 TB Suspect**

November 22, 2024  
Webinar

#### [Bi-State Infectious Disease Conference](#)

November 8, 2024  
St. Louis, Missouri  
In-person

#### [2024 Civil Surgeons Series](#)

**eMedical  
Reporting Process**  
December 12, 2024  
Webinar

#### **Save the Date** [Union NAR TB Conference](#)

Feb/Mar 26-March 1  
Vancouver, BC

#### **Save the Date** [NTCA Conference](#)

June 2-6, 2025  
Atlanta, GA



## Recent Clinical Intensives: Resounding Successes

This month, we hosted two highly successful TB Clinical Intensives, drawing significant participation and engagement. The first intensive took place in Rochester, Minnesota, attracting over 150 in-person and livestream participants. Following this, we collaborated with Iowa Health and Human Services to host another intensive in Des Moines, Iowa, which also saw over 150 in-person attendees.

Both events featured a series of insightful presentations on critical topics, including drug-resistant TB, co-morbidities, and the intersection between TB and mental health. The feedback from participants was overwhelmingly positive, with an overall satisfaction rating ranging from excellent to very good. Impressively, 99% of attendees reported that all conference objectives were met. One participant remarked, "All of the speakers were exceptional! Each played a perfect part in the intensive."

If you believe a TB Clinical Intensive could benefit your state, please reach out to us at [tbcenter@mayo.edu](mailto:tbcenter@mayo.edu).

## Bi-State ID Conference

Don't miss the Bi-State Infectious Disease Conference on November 8th in St. Louis, Missouri. This event has been a staple since 1996, thanks to the collaboration of APIC Chapter 73, and supporting public health departments.

You'll get the latest scoop on infectious disease research, with a variety of ID topics covered.

Don't miss out on this chance to learn and network. We can't wait to see you there! [Learn more here](#)

## Innovations in Tuberculosis Series Upcoming Session

### [Class 5 Tuberculosis Suspects](#) November 22, 2024 | 12-1 PM CST

This webinar provides healthcare professionals with an in-depth look at Class 5 Tuberculosis (TB), a unique diagnostic category for suspected TB cases that require further evaluation. Participants explore the five TB classification stages, with a particular focus on the clinical significance and challenges associated with Class 5 TB. [Register Here](#)

## WHO Global TB Report

The World Health Organization (WHO) issued its [2024 Global Tuberculosis Report](#) on October 29, 2024. Find the highlights below.

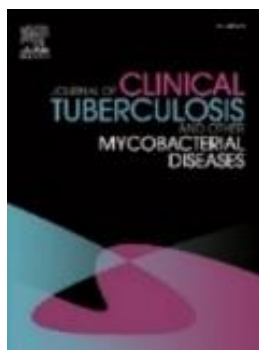
In 2023, an estimated 10.8 million people fell ill with TB, with an incidence rate of 134 new cases per 100,000 population. These numbers are a new high in tuberculosis incidence, the highest number recorded since WHO began global TB monitoring in 1995.

After conceding this dubious distinction during the COVID-19 epidemic, tuberculosis reclaimed its status as the world's leading cause of death from a single infectious agent. Globally in 2023, TB caused an estimated 1.25 million deaths.

The treatment success rate for drug-susceptible TB remains high and continues to improve for drug-resistant TB. However, diagnostic testing and treatment of patients with drug-resistant TB remains suboptimal. Globally in 2023, 79% of people diagnosed with bacteriologically confirmed pulmonary TB were tested for rifampicin resistance, but only 44% of the estimated number of people who developed MDR/RR-TB in 2023 were enrolled in treatment. Read the [full report here](#).

## Journal Spotlight on TB

### [Advanced Pulmonary TB in Alameda County: Ten-year incidence and risk factors](#)



Advanced pulmonary tuberculosis (APT) often indicates delays in TB diagnosis, leading to ongoing transmission and poor outcomes. A study over ten years in Alameda County, California, analyzed 997 TB cases, finding 12.8% had APT. The incidence was 8.8 per 100,000, with no significant

change over time. APT was more common in males, non-US-born individuals, and those with recent drug use or diabetes. Efforts to improve awareness and access to care for high-risk groups, considering cultural and linguistic factors, are essential to address APT effectively.



## CDC Updates

### Listen Up! Podcast | Health Communication

Artificial intelligence technology and generative AI have the potential to revolutionize health communication practice—providing an onslaught of solutions, in seconds, and with just a



stroke of a key. While organizations are implementing policies to support the best use of these technologies in the workplace, the on-ramp to engagement with AI can feel steep. What applications hold the most promise for health communicators? What are the risks and pitfalls? What digital fluency is needed to meet the moment?

Listen in to hear answers to these important questions and more with guests Dr. Annice Kim, senior director of the Center for Communication and Media Impact at RTI International, Dr. Amelia Burke-Garcia, director of NORC Center for Health Communications Science, and Robert Jennings, executive director of the National Public Health Information Coalition or NPHIC. [Listen Here](#)

## We are TB | Somos TB



Just a reminder about this important resource recommendation for the patients and families you serve.

[We are TB](#), and [Somos TB](#) (for Spanish-speakers), is a community of TB survivors, people being treated for TB, and their family members, committed to the common goal of eliminating TB. The group provides comprehensive peer support for current TB patients and TB clinics.

## Newsletter Content Suggestions

We invite you to be active participants in shaping the content of our newsletter. We will do our best to provide clarity on your TB related questions and include topics and events you would like to showcase. Simply submit your ideas to [TB Times Content Suggestion](#). Each issue we will feature suggested content, making this newsletter a true reflection of your needs.

## Vision

To become a regionally, nationally, and internationally recognized Center of Excellence for tuberculosis.

## Mission

To contribute, in a meaningful way, to the control, management, and elimination of tuberculosis regionally, nationally, and globally.



## Medical Consultation

MCCT provides expert medical consultation to public health and medical professionals in our assigned region. We have colleagues with expertise in public health nursing, pharmacy, laboratory, occupational health, pediatrics, and radiology just to name a few.

Consultations can be requested using one of the following options:

- Submit at [IDCrowd Platform](#)
- Email [tbcenter@mayo.edu](mailto:tbcenter@mayo.edu)
- Call 507-284-0275

IDCrowd is the preferred platform for submitting requests used by all TB COEs. If you are using IDCrowd for the first time, choose the option to register for a new membership. Additional information on how to submit a request can be found [here](#).

## Mini Fellowships

As part of the TB COE initiatives, MCCT is providing mini-fellowship opportunities for healthcare professionals seeking to deepen their understanding of TB.

Experiences will be curated to meet individual learning needs. Some experiences that may be offered include shadowing healthcare professionals as they interact with patients, observing directly observed therapy (DOT), and participating in TB case reviews.

You can find out more information by emailing [tbcenter@mayo.edu](mailto:tbcenter@mayo.edu). To be considered for a mini fellowship, please submit an [application here](#).

## Educational Requests

MCCT is able to support a variety of TB related needs including virtual and in-person training, educational material development, and technical assistance. Please contact us to discuss ways we can support your work in treating and preventing tuberculosis.

## Contact Us



[TBcenter@mayo.edu](mailto:TBcenter@mayo.edu)



[centerfortuberculosis.mayo.edu](https://centerfortuberculosis.mayo.edu)



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