



TB is on the move

Protect your patients and
community through TB prevention



Global migration and tuberculosis

The majority of tuberculosis (TB) cases that occur in low-incidence countries are due to the reactivation of TB infection in foreign-born populations (1–3).

Identifying and treating latent TB infection (LTBI) are critical steps in preventing the spread of this disease. Indeed, these measures are part of the World Health Organization's (WHO's) global strategy to eliminate TB, which includes testing for LTBI with the tuberculin skin test (TST) or an interferon-gamma release assay (IGRA) such as QuantiFERON®-TB Gold (QFT®) (4).

Preferred over the TST for immigrants



“QFT is as sensitive as TST in detecting TB with fewer requiring CXR and being diagnosed with LTBI. These data support the use of QFT over TST in [an immigrant population with a high prevalence of tuberculosis and BCG vaccination].” (5)

Proven effective in children



“The findings support the preferential use of QFT over TST for pre-immigration screening of foreign-born children 2 years of age and older and lend support to the preferential use of IGRAs in testing foreign-born children for latent TB infection.” (6)

QFT has significant advantages for testing migrant populations:

✓ **Accurate**

QFT has been shown to more accurately identify TB infection in migrants compared to the >100-year old TST (5, 6). Importantly, the widely-used BCG vaccine causes false positive TSTs, whereas QFT is unaffected by BCG vaccination (5).

✓ **Reliable**

Other testing methods are subjective, making them prone to significant variability and human error (7, 8).

✓ **Convenient**

QFT requires only one visit to a health clinic, during which a small sample of blood is taken. Results are available in as little as 24 hours, making it more convenient for both patient and provider (9).

✓ **Cost-effective**

A recent study in the UK showed QFT to be the most cost-effective testing method for migrant populations – compared to both the TST and other IGRAs (10).

✓ **Leads to better patient care**

For foreign-born persons who have received the BCG vaccine, QFT represents an improved standard of care. Fewer false positive results are associated with QFT, which means less unnecessary chest radiography and treatment for your patients (5, 11). QFT has also been proven more effective than other methods in identifying TB infection in children (6, 12).



PASSPORT

Prevent TB in your community – test your patients with QFT

QFT provides the accurate results needed to identify and treat those who are most likely to develop TB, the convenience of a single visit and the reliability of an objective, laboratory-based result.

Contact QIAGEN today to find out more about how QFT can help prevent the spread of TB in your community.

Visit www.QuantiFERON.com/immigration for more information.

References:

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QuantiFERON-TB Gold (QFT) is CE marked. QFT is approved by the US FDA.

QFT is approved by the FDA as an in vitro diagnostic aid for detection of *Mycobacterium tuberculosis* infection. It uses a peptide cocktail simulating ESAT-6, CFP-10, and TB7.7(p4) proteins to stimulate cells in heparinized whole blood. Detection of IFN- γ by ELISA is used to identify in vitro responses to these peptide antigens that are associated with *M. tuberculosis* infection. FDA approval notes that QFT is an indirect test for *M. tuberculosis* infection (including disease) and is intended for use in conjunction with risk assessment, radiography, and other medical and diagnostic evaluations. QFT Package Inserts, available in multiple languages, as well as up-to-date licensing information and product specific disclaimers can be found at www.QuantiFERON.com.

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