## Midterm-stage Follow-up for Tuberculosis Infection along the Coastal Region of Northern Miyagi after the Great East Japan Earthquake

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Received date: October 27, 2017; Accepted date: November 06, 2017; Published date: November 10, 2017 Copyright:

	Early Stage (2011+2012)	Midterm stage (2013+2014)	Early vs. Mid
Population, n	959,435	923,505	
TB patients, n	184	145	ns
Per 100,000 people	19.2	15.7	
Female, n (%)	90 (48.9)	66 (45.5)	ns
Tuberculosis patients who required screening			
Total number, n	46	48	
Contact persons			
Total number, n	1,479	1,257	ns
Pulmonary TB, n	77	63	ns
Per 100,000 people	8.0	6.8	
Age, n (%)			
0–19 years	0 (0.0)	3 (0.5)	ns
20–49 years	8 (10.4)	10 (15.9)	ns
50–69 years	19 (24.5)	11 (17.5)	ns
70 years	50 (64.9)	38 (60.3)	ns
Extra pulmonary TB, n	28	30	ns
Per 100,000 people	2.9	3.2	
Age, n (%)			
0–19 years	1 (3.6)	1 (3.3)	ns
20–49 years	3 (10.7)	3 (10.0)	ns
50–69 years	3 (10.7)	7 (23.3)	ns
70 years	21 (75.0)	20 (75.0)	ns
LTBI, n	79	52	P=0.032
Per 100,000 people	8.2	6.8	
Age, n (%)			
0–19 years	2 (2.6)	9 (17.3)	P=0.007
20–49 years	30 (37.2)	18 (34.6)	ns
50–69 years	28 (35.9)	12 (23.1)	ns
70 years	19 (24.4)	13 (25.0)	ns
TB: Tuberculosis, LTBI: Latent Tuberculosis Infection.			

## Table 1: TB patients in the coastal region of northern Miyagi. co suq

e number of patients requiring contact screening (sputum smeartest or culture positive were 46 at the early stage and 48 at the midterm stage U er the disaster: e total number of TB patients who required contact screening did not change between early and midterm stage following the earthquake (Table 1).

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with pulmonary TB, extra pulmonary TB, and LTBI were 77, 28, and 79, respectively, and at midterm, the numbers of these patients were 63, 30 and 52, respectively. Furthermore, the number of patients with pulmonary TB had slight decreased between the early and midterm stages post disaster (80 vs 68 per 100,000, respectively) (Table 1). e number of extra pulmonary TB patients did not di er signif cluttm between early and midterm stages (29 vs 32 per 100,000, respectively), while the number of LTBI patients had signif cluttm decreased (p<0.032, 81 vs 5,6 per 100,000, respectively) (Table 1).

Our previous report indicated that in the pre-disaster period (2009-2010) prevalence of total TB, pulmonary TB, extra pulmonary

TB, and LTBI was 96, 67, 1.0, and 1.8 respectively [1]. In this study, the number of patients with pulmonary TB had returned to predisaster stage (67 vs

## Discussion

Several studies have shown that the incidence of and mortality from TB increased U er World Wars I and II [4,5]. A similar trend was also observed by Drobniewski and Verlander [6] upon reviewing data on TB infection rates during 36 conflicts that occurred between 1975 and