

Task Force Issues Final Recommendation Statement on Screening for Latent Tuberculosis Infection

Adults at increased risk for tuberculosis should be screened

WASHINGTON, D.C. – May 2, 2023 – The U.S. Preventive Services Task Force (Task Force) today published a final recommendation statement on screening for latent tuberculosis infection (LTBI). The Task Force continues to recommend that adults at increased risk for tuberculosis (TB) be screened for LTBI. **This is a B grade.**

Grade in this recommendation:

B: Recommended.

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Tuberculosis is a bacterial infection spread through the air from one person to another that usually affects the lungs. It is a significant public health concern in the United States. People can be infected with TB bacteria but not have any signs or symptoms or be contagious; this is known as LTBI. If left untreated, people with LTBI can eventually progress to having active TB, which can cause serious health problems and spread to others.

“Screening for latent tuberculosis infection in people at increased risk is an effective way to identify the infection so that it can be treated before it progresses to active TB,” says Task Force member Gbenga Ogedegbe, M.D., M.P.H. “The Task Force continues to underscore the importance of LTBI screening in reducing rates of active TB, protecting the health of people nationwide.”

There are two types of screening tests for LTBI in the United States: the tuberculin skin test and the interferon-gamma release assay, which is a blood test. Both tests have been shown to be safe and effective. It is important that people who screen positive go on to receive appropriate follow-up and treatment. For people diagnosed with LTBI, antibiotic treatments can help clear the infection safely and effectively so that it does not progress to active TB.

“People at increased risk for tuberculosis who would benefit from screening include people born or who have lived in countries with increased rates of TB and those who have lived in certain group settings, like prisons or homeless shelters,” says Task Force chair Michael Barry, M.D. “Importantly, anyone who screens positive needs further clinical tests to rule out active TB and confirm an LTBI diagnosis.”

In the United States, the majority of active TB cases occur in people born outside of the country. In 2020, Mexico, the Philippines, India, Vietnam, and China were the most common countries of birth among people living in the United States with new cases of TB. Most new TB cases are thought to be due to the progression of LTBI to active TB rather than the transmission of active TB. Therefore, screening for and treating LTBI are critical to reducing the burden of TB.

The Task Force’s final recommendation statement and corresponding evidence summary have been published online in the *Journal of the American Medical Association*, as well as on the Task Force website at <https://www.uspreventiveservicestaskforce.org>. A draft version of the recommendation statement and evidence review were available for public comment from November 22, 2022, to December 27, 2022.

The Task Force is an independent, volunteer panel of national experts in prevention and evidence-based medicine that works to improve the health of people nationwide by making evidence-based recommendations about clinical preventive services such as screenings, counseling services, and preventive medications.

Dr. Ogedegbe is the inaugural and founding director of the Institute for Excellence in Health Equity at NYU Langone Health. He is the Dr. Adolph and Margaret Berger Professor of Medicine and Population Health at NYU Grossman School of Medicine. Dr. Ogedegbe is a member of the National Academy of Medicine.

Dr. Barry is the director of the Informed Medical Decisions Program in the Health Decision Sciences Center at Massachusetts General Hospital. He is also a professor of medicine at Harvard Medical School and a primary care clinician at Massachusetts General Hospital.

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