



North Carolina Department of Health and Human Services
Division of Public Health

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April 22, 2013 (2 pages)

To: Local Health Department TB Programs, Hospital Infection Control Practitioners
From: Jason Stout, MD, MHS, TB Controller/Medical Director
Re: Tubersol® Shortage

As you may be aware, there is an ongoing shortage of Tubersol® (PPD), as well as of the other purified protein derivative (Aplisol®). It is unclear when this shortage will resolve. Pending resolution of this shortage, the NC TB program recommends the following measures (summarized in a table at the end of this memo):

- Prioritize tuberculin skin testing for persons of highest public health priority, in priority order:
 1. Contacts to a person with pulmonary or laryngeal TB
 2. As part of an evaluation of persons with symptoms suggestive of TB disease
 3. Persons arrived from high TB incidence countries within the past year
 4. Persons infected with HIV
- Note that all persons in the highest public health priority listed above (i.e. contacts, TB suspects, arrivals from high incidence countries, and HIV-infected persons) may be tested with an interferon gamma release assay (IGRA) in place of a tuberculin skin test, if resources are available to perform IGRA testing
- Defer routine annual tuberculin skin testing performed as part of an infection control program (i.e. employee screening). We do not recommend substituting an IGRA for annual testing if the employee has previously received tuberculin skin testing; deferring testing until tuberculin is available is the preferred strategy in this case.
- Per recent CDC guidance, defer required tuberculin skin testing or use an IGRA for the following groups for whom it is required:
 - Staff with direct inmate contact upon employment
 - Inmates in the custody of the Department of Corrections (both testing upon incarceration and yearly thereafter)
 - Staff of licensed nursing care homes upon employment
 - Residents upon admission to licensed nursing homes or adult care homes
 - Staff in adult day care centers providing care to persons with HIV/AIDS upon employment
- Agencies should have a plan to track persons for whom testing is deferred and to test such persons when tuberculin is available.
- Per CDC and NC TB Control guidelines, do not perform administrative tuberculin skin testing for low-risk persons (e.g. child care employees, teachers, food service employees)
- Consider alternative screening tests such as an Interferon Gamma Release Assay (IGRA)—blood tests for TB infection (T-SPOT®.TB and QuantiFERON® Gold in-tube).
 - Per the recent (8/2012) revision to the NC Administrative code and CDC guidelines, IGRAs are acceptable for screening recent contacts, persons with HIV/AIDS, and any other individuals for tuberculosis infection in which a tuberculin skin test might be used

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At this time it is anticipated that Tubersol® may be available in late May, but this is only an estimate. The NC TB Program will provide notification when the shortage is over and deferred screening can resume as required. Please contact your regional TB nurse consultant or state medical TB consultant with any questions or concerns.

Table. Recommendations for Tuberculosis Screening During the Tuberculin Shortage

Group	Recommendation
<p>Persons at high risk for recent tuberculosis infection or disease:</p> <ul style="list-style-type: none"> Contacts to infectious TB TB suspects Recent immigrants (<1 year) from high-incidence countries HIV-infected persons 	<p>Screen with tuberculin if available</p> <p>Use an IGRA if tuberculin is not available</p>
<p>Persons being screened annually as part of an employee infection control program</p>	<p>Defer screening until tuberculin becomes available</p>
<p>Persons for whom screening is required by NC regulations:</p> <ul style="list-style-type: none"> • Staff with direct inmate contact upon employment • Inmates in the custody of the Department of Corrections (both testing upon incarceration and yearly thereafter) • Staff of licensed nursing care homes upon employment • Residents upon admission to licensed nursing homes or adult care homes • Staff in adult day care centers providing care to persons with HIV/AIDS upon employment 	<p>Use an IGRA if resources are available</p> <p>Otherwise defer screening until tuberculin becomes available</p>
<p>Low-risk persons being tested for administrative purposes</p>	<p>Do not screen</p>