

2024 Tuberculosis Annual Report

San Mateo County Health System Tuberculosis Control Program
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SAN MATEO
COUNTY HEALTH
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Tuberculosis in San Mateo County

- 47 new active cases
- Incidence: 6.3 cases/100,000 persons
- SMC ranked as 9th highest incidence in California
- TB-associated deaths: 2
- 945 contacts exposed to infectious TB cases

Incidence Trend

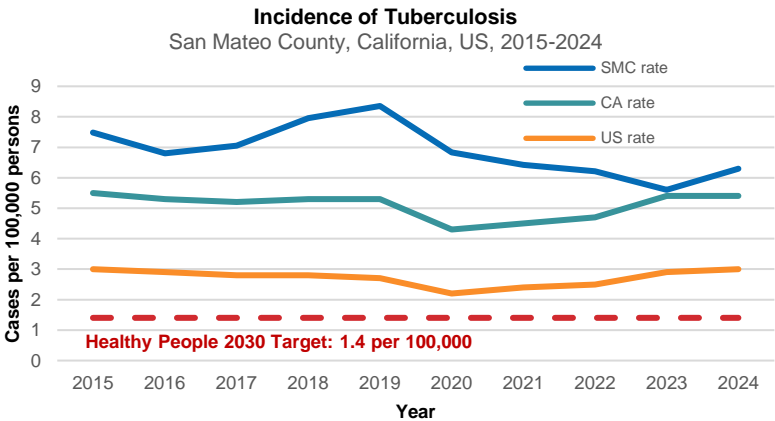


Figure 1. Incidence of TB in San Mateo County remains above the California and US incidence rates (per 100,000).

Patient Demographics

		2024 Cases	2020-2024 Annual Average Number of Cases	2020-2024 Average Incidence Rate (per 100,000)
Sex (n=47)	Female	12	18.2	4.8
	Male	35	28.8	7.8
Age (n=47)	0-4	0	0.4	1.0
	5-14	0	0.4	0.5
	15-24	8	5.0	6.4
	25-44	9	9.2	4.3
	45-64	12	13.4	6.8
	65+	18	18.6	13.6
Race/Ethnicity (n=47)	AIAN*	0	0.0	0.0
	Asian	37	33.6	13.8
	Black	0	0.6	3.5
	Hispanic	9	9.2	6.4
	Multirace	0	0.0	0.0
	NHPI**	1	0.8	8.0
	White	0	2.4	0.8

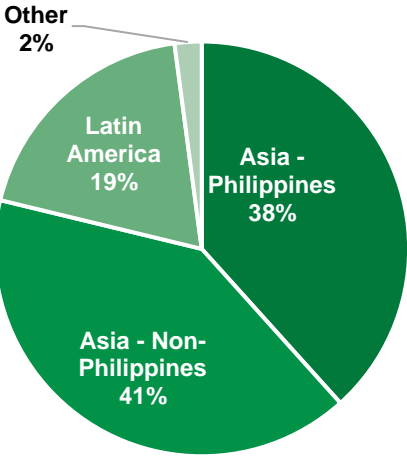
*American Indian/Alaska Native

**Native Hawaiian/Pacific Islander

Table 1. Based on 5-year average incidences, the groups most affected by TB in San Mateo County are: males, individuals 65 years of age and older, and Asian populations.

Cases by Origin

- US Born: 0
- Foreign Born: 47



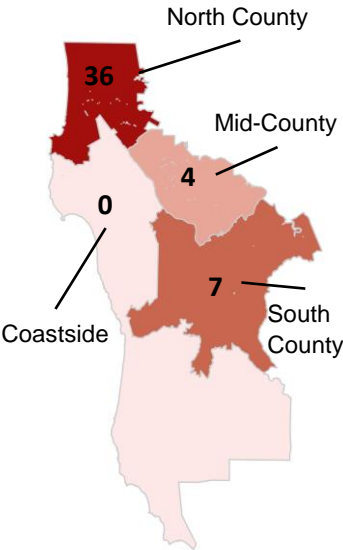
Country	Cases
Philippines	18
Myanmar	7
Mexico	4
Nepal	3
Vietnam	3
China	2
Guatemala	2
India	2
Nicaragua	2
Colombia	1
Indonesia	1
Samoa	1
Taiwan	1

Figure 2. Over one-third of foreign-born cases of active TB were in individuals born in the Philippines.

Patient Geography

Daly City

- 21 cases (45% of all county cases)
- Incidence of 20.5/100,000
- 51% of the population is foreign-born individuals
- Incidence of 40.2/100,000 in foreign-born population



Demographic Highlights

- Median age: 54 years old
- Age range: 19-98 years old
- 0 pediatric cases (0-14 years old)

Social Risk Factors (within past 12 months)

- Unhoused: 2
- Correctional facility: 1
- Long-term care housing: 1
- Substance use disorder (including alcohol): 5

Clinical Characteristics

Clinical Characteristics of TB Cases (2024)	Feature	Cases	Percent
Site of Disease (n=47)	Pulmonary only	34	72.3%
	Extrapulmonary only	11	23.4%
	Both pulmonary and extrapulmonary	2	4.3%
Comorbidities (n=47)	HIV/AIDS	0	0.0%
	Diabetes mellitus	19	40.4%
	End-stage renal disease	4	8.5%
	Other immunosuppression	4	8.5%

Table 2. The most common reported comorbidity was diabetes mellitus.

Microbiological Characteristics

Microbiological Characteristics of TB Cases (2024)	Feature	Cases	Percent
Culture Status (n=47)	Culture positive	40	85.1%
	Clinical case	7	14.9%
Sputum Smear Status* *for cases with positive sputum cultures (n=32)	Positive	20	62.5%
	Negative	12	37.5%
Drug Susceptibility* *culture positive only (n=40)	Susceptible	34	85.0%
	Resistant	6	15.0%
Anti-TB Drug Resistance (n=6)	INH only	3	50.0%
	PZA only	2	33.3%
	Multiple	1	16.7%

Table 3. Over 85% of TB cases were culture positive, and 85% of culture positive cases were drug susceptible. 6 cases were drug resistant.

TB Control Workload

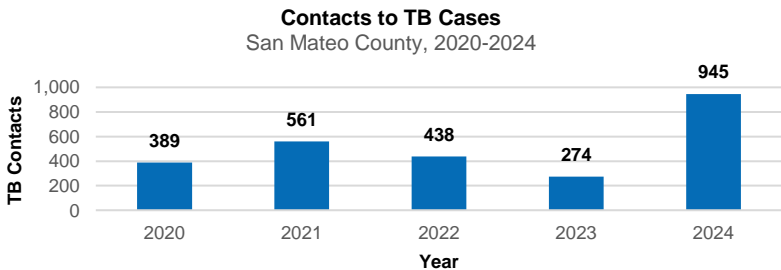


Figure 3. 2024 had the highest number of contacts exposed to TB in San Mateo County over the last five years.

	2020	2021	2022	2023	2024
SMC Infectious TB Cases	38	41	28	35	38
SMC TB Contacts	389	561	438	274	945
Interjurisdictional and Airline Investigations	18	12	31	25	29
Interjurisdictional TB Contacts	94	162	84	143	207
Immigration Clearance Cases	35	82	112	192	283
LTBI reports from Civil Surgeons	115	140	100	121	122
Humanitarian Parolees	N/A	N/A	28	217	157
Unaccompanied Minors	2	11	15	29	13

Table 4. SMC TB Control works to ensure the health of San Mateo residents through supporting interjurisdictional and airline investigations, immigration clearance cases, civil surgeon cases, unaccompanied minor cases, and humanitarian parolee cases.

TB Control Overview

Forty-seven active TB cases received TB case management services by the TB Control team’s Public Health Nurses and were monitored by TB Community Workers using directly observed therapy (DOT) and video observed therapy (VOT) methods. This helps to ensure appropriate isolation of infectious TB cases and proper administration of TB treatment.

The Communicable Disease Investigators (CDI) interviewed **38** infectious TB cases with **945** elicited contacts who were notified of their TB exposure. In 2024, there were a higher number of persons exposed to TB in San Mateo County related to group settings including schools, shelters, correctional facilities, and work site exposures. CDIs followed up with these 945 persons to ensure TB evaluation was completed. CDIs received **29** Interjurisdictional and Airline Notifications reporting **207** San Mateo County residents who were exposed to TB outside of San Mateo County and require a TB evaluation. The CDI’s also follow-up with multiple categories of immigrant populations. Immigrants granted US residency from countries with a high prevalence of TB are medically screened before entering the U.S., some findings require additional TB evaluation upon arrival to the U.S. The CDC sends notifications to the local health jurisdiction (LHJ) as mandated by U.S. immigration law for those who require additional TB screening. In 2024, San Mateo County received notification of and followed up with **283** persons arriving in our county who met these criteria. Additionally, all persons living in the U.S. who apply to adjust their immigration status are required by the CDC to undergo a complete medical examination for TB disease as part of the application process. Civil surgeons must report all applicants with confirmed or suspected TB, as well as all applicants diagnosed with latent tuberculosis infection (LTBI). In 2024, San Mateo County received **122** LTBI reports from civil surgeons and provided follow-up including health education and referral for treatment. San Mateo County supported **157** humanitarian parolees with completing this screening requirement within 90 days of arrival. Lastly, our program received notification of **13** Unaccompanied Minors found to have LTBI when screened at detention centers who were released to family members residing in our county.

For Further Information

- Call SMC TB Control: **650-573-2346**
- Visit smchealth.org/TB
- California Department of Public Health: cdph.ca.gov/Programs/CID/DCDC/Pages/TBCB.aspx
- Centers for Disease Control: cdc.gov/tb

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Data sources:

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- Centers for Disease Control and Prevention, National Center for HIV, Viral Hepatitis, STD, and TB Prevention, Division of Tuberculosis Elimination. Provisional 2024 Tuberculosis Data, United States. <https://www.cdc.gov/tb-data/2024-provisional/index.html>
- Centers for Disease Control and Prevention, National Center for HIV, Viral Hepatitis, STD, and TB Prevention, Division of Tuberculosis Elimination. Reported Tuberculosis in the United States, 2022. Table 1. Tuberculosis Cases, Incidence Rates per 100,000 Population, Deaths, Death Rates per 100,000 Population, and Percentage Change: United States, 1953–2022. <https://www.cdc.gov/tb/statistics/reports/2022/table1.htm>