European Respiratory Society Annual Congress 2013

Abstract Number: 3497 Publication Number: P4683

Abstract Group: 10.2. Tuberculosis

Keyword 1: Tuberculosis - management Keyword 2: Infections Keyword 3: Epidemiology

Title: High mortality from tuberculosis in Denmark

Mr. Andreas 21284 Fløe andrnie@rm.dk MD¹, Dr. Ole 21285 Hilberg olehilbe@rm.dk MD¹, Mr. Christian 21286 Wejse wejse@dadInet.dk MD², Mr. Anders 21287 Løkke andeotte@rm.dk MD¹, Mr. Jacob 21288 Kjellberg jkc@dsi.dk³, Ms. Rikke 21289 Ibsen info@itracks.dk⁴ and Dr. Poul 21290 Jennum poul.jennum@regionh.dk MD⁵. ¹ Department of Pulmonary Medicine, Aarhus University Hospital, Aarhus, Denmark, DK-8000 ; ² Department of Infectious Diseases, Aarhus University Hospital, Skejby, Aarhus, Denmark, DK-8200 ; ³ Danish Institute for Health Services Research, Danish Institute for Health Services Research, Danish Institute for Health Services Research, Copenhagen, Denmark ; ⁴ Itracks, Itracks Klosterport 4E, Aarhus, Denmark, DK-8000 and ⁵ Danish Center for Sleep Medicine, Department of Clinical Neurophysiology, Center For Healthy Ageing, Faculty of Health Sciences, University of Copenhagen, Glostrup Hospital, Copenhagen, Denmark, 2600 .

Body: Hypothesis: We hypothesize that survival among TB-patients in Denmark is lower than among the general population. Objective: To evaluate survival in a national Danish TB cohort, and to estimate relative survival compared with population controls with no TB diagnosis, in a retrospective case-control study. Methods: Using the Danish National Patient Registry, we identified 8433 TB-patients (1997-2008). They were matched to 33,707 controls by age, gender, civil status and geography. Mortality data were obtained from the Danish Civil Registration System. We calculated cumulative survival function, adjusting for varying follow-up, and hazard ratio. Results: 8433 cases and 33707 controls were followed for a maximum of 12 (span: 0-12) years. 77,7% of cases and 90,1 % of controls were consored. Mean follow-up was 6.1 years for cases, 6,9 years for controls. Cumulative survival was significantly lower among cases, particularly reflecting elevated mortality in the first year following TB-diagnosis (survival after one year: cases 92,8% (92,2;93,3), controls 98,6% (98,4;98,7)). Hazard ratio of mortality was 2,48.

Conclusion: Cumulative survival of TB-patients is significantly lower than of the background population, mainly because of a substantially higher mortality in the first year after TB-diagnosis. For a low-burden country, a strikingly high absolute difference in survival of 5,8% in the first year was found.