

# Tuberculosis (TB)

## Why Is This Important?

Tuberculosis (TB) is an infectious disease caused by the bacterium *Mycobacterium tuberculosis*. TB spread through the air, usually by coughing. It affects mainly the lungs but can infect any part of the body.

In Canada, most reported cases are among foreign-born individuals, while in Saskatchewan the majority of cases are among First Nations and Métis individuals (see [Additional Data](#)).<sup>1</sup>

People may be infected with TB but not be sick (called latent TB infection (LTBI)). Most exposed and infected individuals will not develop TB.<sup>2</sup> The risk is higher in immune-compromised individuals, for example if HIV positive.

TB and LTBI are treatable and curable. Drug resistant TB is of concern worldwide because it limits the drugs that can be used to treat TB ([About the Data](#)). The prevention of active TB relies on treatment and prevention of new cases and LTBI.

The goal of the Saskatchewan Provincial Tuberculosis Strategy, released in 2013, is to reduce the active TB rate (new and relapsed cases) in Saskatchewan to 25% by 2017/18 and 50% by 2022/23.

## What Is Being Done?

[Saskatchewan TB Strategy](#)

## To Learn More:

[Canadian Tuberculosis Standards, 7th Edition](#)

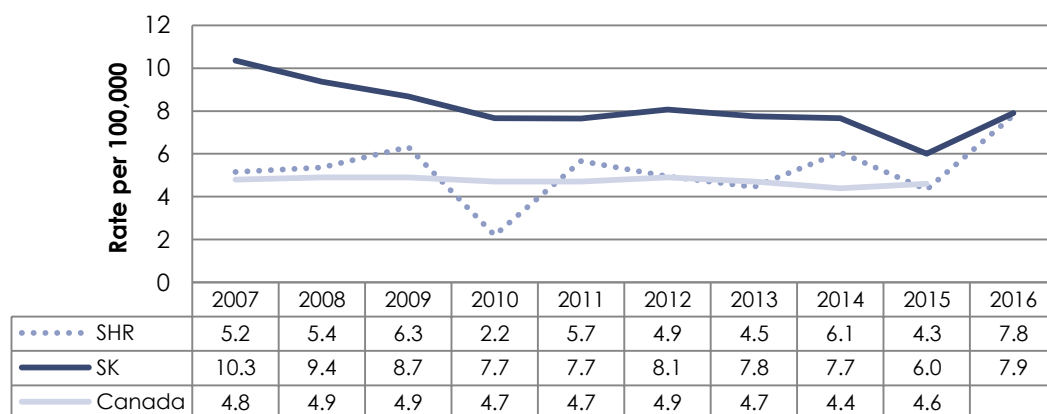
[Canadian Tuberculosis Reporting System](#)

## Highlights

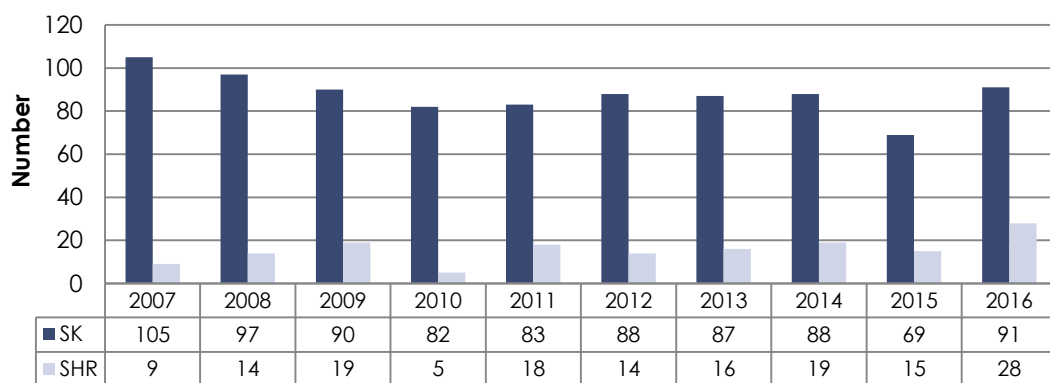
### TB rate in the Region in 2016 was similar to the Provincial rate.

- Since 2007 the rate of TB in the Region has varied from 2.2 to 7.8 per 100,000 population (*Figure 1*).
- The rate in 2016 was 7.8 per 100,000, which is similar to the Provincial rate.
- In 2016, there were 28 cases of TB reported in the Region and 91 in total in the province (*Figure 2*).
- Less than five TB cases (3.6%) in 2016 had previously been treated for TB (retreatment), compared to 82 cases (9.9%) for the province. Retreatment indicates a relapsed or re-infected case.
- In 2016, less than five cases (3.6%) in the Region were drug resistance. Overall, only 1.1% of the cases in the province were drug resistant, namely primary-mono-resistant (see [About the Data](#)).
- Of the 28 cases reported in the Region in 2016, 19 (68%) had completed contact tracing investigations. These investigations generated 682 contact names, an average of 36 contacts per case.
- HIV infection increases the risk of developing TB if infected. The HIV prevalence among TB cases in the Region in the past year was 18%. This figure is more than double that of Saskatchewan overall (9%).

**Figure 1: Tuberculosis Rates per 100,000 Population, Saskatoon Health Region, Saskatchewan, and Canada, 2007 to 2016**



**Figure 2: Tuberculosis Cases, Saskatoon Health Region and Saskatchewan, 2007 to 2016**



Source: TBIS