

# Adherence to published guidelines on TB screening before the start of treatment with biologics in Germany

SAT0154

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## Introduction

To examine how strictly the screening recommendations for latent tuberculosis (TB) are observed in Germany by rheumatologists treating RA patients with biologics.

## Method

- The German biologics register RABBIT has been implemented in 2001 and follows up RA patients with a new start of any of the licensed cytokine inhibitors.
- We surveyed 162 rheumatological practices and outpatient clinics participating in the German biologics register RABBIT.
- We investigated practice variation in TB screening methods in German rheumatology.

## Summary:

Even in specialised rheumatologic care there is variation in screening procedures as well as in consequences taken. Deviation is larger in units with only a few patients under biologic therapy.

## Conclusion:

Tb screening recommendations should be harmonized and their distribution should be intensified.

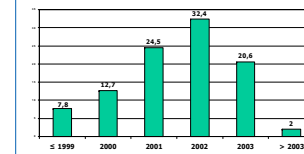
## Disclosure:

The German biologics register is supported by a joint, unconditional grant from Wyeth Pharma GmbH, essex pharma GmbH, Amgen GmbH and Abbott GmbH & Co. KG.

## Do you screen for TB before starting a treatment with biologics?

Yes, always	87%
Only before treatment with infliximab or adalimumab	3%
Not before treatment with Anakinra	7%
Only in some patients (e.g. > 60 yrs. or medical history)	3%

## When did you start screening for TB? (% of units)



## When do you prescribe prophylactic treatment for TB?

Always if skin test is positive	58%
Always if chest x-ray shows suspect findings	32%
Only when both tests (x-ray & skin test) are positive	15%
No prophylactic treatment (in some units: no start of biologics)	6%

## Frequency of different TB skin tests:

No skin test	4,4 %
Tine-(stamp)-test	23,0 %
Intradermal Mendel-Mantoux	70,1 %
Referral to a pulmonologist	2,6 %

## Skin test result considered as positive, if:

Induration / palpable skin infiltration is:	
< 5 mm	9 (13 %)
≥ 5 mm – 10 mm	43 (62 %)
> 10 mm	14 (20 %)
Erythema	3 ( 4 %)

## Recommendations of the Paul-Ehrlich-Institut (PEI) for the screening for latent TB before the start of biologics (Feb. 2002)

- Intradermal TB test (Mendel-Mantoux) with 10 TE
- Induration of ≥ 5 mm = positive

## Latent TB must be presumed, if:

- ✓ Skin test result (1st or 2nd) with 10 TE is positive
- ✓ Negative skin-test but suspect findings in the **chest X-ray**
- ✓ Skin-test and chest x-ray show negative results, but **possible contact** to potentially infectious persons

## Which prophylactic treatment do you usually use?

Isoniazid	94%
Rifampicin	6%

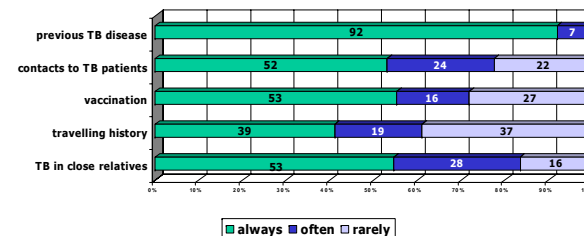
## Performing of a chest x-ray:

- in 95% of units

## % of units performing an intradermal TB test according to the recommendations :

Units with...	
1 - < 20 biologics patients	55%
20 – 100 biologics patients	80%
> 100 biologics patients	91%

## How often do you ask for . . . . ? (% of units)



## After initiation of prophylactic treatment: how long do you wait until you start a biologic therapy? (% of units)

