Tuberculin PPD

Revision Date: March 24, 2014

Please consult the Product Monograph\(^1\) for further information about the TUBERSOL®.

<table>
<thead>
<tr>
<th>TUBERSOL®</th>
</tr>
</thead>
<tbody>
<tr>
<td>Manufacturer</td>
</tr>
<tr>
<td>Off-license use</td>
</tr>
</tbody>
</table>

**Indications for use of provincially funded TUBERSOL®**

- Tuberculin skin test (TST) may be recommended for the following populations:
  - Individuals at increased risk for recent infection with *Mycobacterium tuberculosis* (MTB) e.g., TB contacts and travelers to TB endemic countries.\(^2\)
  - Individuals with medical conditions/therapies that increase risk of progression from latent TB infection (LTBI) to development of active TB disease.\(^2\)
  - Individuals with a history of untreated or inadequately treated TB disease.
  - Foreign-born individuals who are referred for medical surveillance.\(^2\)
  - Individuals in health professions and others who work or volunteer with populations at increased risk for TB.\(^2\)
  - Residents of congregate living settings such as correctional institutions, substance abuse/mis-use rehabilitation centres, and continuing care facilities.\(^2\)
  - Preschool and school-aged children living in first Nations communities.\(^2\)
  - Individuals using shelters and drop-in centres for the homeless and under-housed.\(^2\)

For further information and specifics on TST refer to *Tuberculosis Prevention and Control Guidelines for Alberta*\(^2\)

**Note:** Provincially funded TUBERSOL® is not currently supplied to private travel clinics for travelers; occupational health programs outside of those described in the *Tuberculosis Prevention and Control Guidelines for Alberta*; or for diagnostic purposes (either in facilities or physician offices).\(^2\)

**Notes:**

- Travelers will be screened using TST according to the Canadian Tuberculosis Standards. All others will be charged a fee for this service.
- Individuals, who attend post-secondary educational institutions (either in Alberta or in other provinces/countries) and are eligible for TST as outlined in Alberta TB guidelines, will be offered provincially funded screening.
- Non-Alberta residents, who attend post-secondary institutions in Alberta and are eligible for TST as outlined in Alberta TB Guidelines, will be offered provincially funded screening.

<table>
<thead>
<tr>
<th>Dose</th>
<th>0.1 mL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Route</td>
<td>Intradermal (ID) injection</td>
</tr>
<tr>
<td>Schedule</td>
<td>Refer to <em>Tuberculosis Prevention and Control Guidelines for Alberta – Case Detection and LTBI Screening Programs: Testing to Identify Infection with Mycobacterium Tuberculosis, Administration, Reading and Interpretation of TST</em>.(^2)</td>
</tr>
</tbody>
</table>
**Contraindications**

- Known severe hypersensitivity to any component of TUBERSOL® or its container.
- Anaphylactic reaction to a previous tuberculin skin test
- Severe reaction (e.g., necrosis, blistering or ulcerations) to previous tuberculin skin testing (TST)\(^1\)
- History of past active tuberculosis or treatment for tuberculosis infection or disease.\(^1\)
- Extensive burns or eczema because of greater likelihood of adverse reactions or severe reactions.\(^1\)
- Administration of live virus vaccines (MMR, varicella, yellow fever and live attenuated influenza vaccine\(^3\)) within the previous four weeks.\(^1\) TUBERSOL® may be administered before or at the same clinic visit as the live vaccine(s).

Refer to *Tuberculosis Prevention and Control Guidelines for Alberta – Case Detection and LTBI Screening Programs: Testing to Identify Infection with Mycobacterium Tuberculosis, Administration, Reading and Interpretation of TST.* \(^2\)

**Precautions**

- Do not inject subcutaneously, intramuscularly or intravenously.
- Impaired or attenuated cell-mediated immunity may cause a false negative tuberculin reaction.\(^1\)
- HIV-infected persons may have a compromised ability to react to tuberculin skin tests.\(^1\)
- TST should be deferred for four weeks following a major viral infection.\(^1\)
- A negative TST in an infant younger than six months of age may not be reliable due to possible delay in development of cell-mediated immune responses required to demonstrate PPD reactivity.\(^2\)

**Interpretation of TST**

- Reading by a trained health professional (knowledgeable in the TB Control Program of Alberta referral and/or follow-up processes and have training and experience in TST reading and interpretation)\(^2\) must be done 48 to 72 hours after administration of the test. Self-reading of a tuberculin test is not an acceptable practice and should not be allowed under any circumstances.\(^2\)
- Identify the presence or absence of induration. Redness is to be ignored when assessing induration. Measure, using a caliper, the diameter of induration at the widest part transversely to the long axis of the forearm (i.e., from side-to-side, across the forearm).
- TST readings must be recorded in millimeters, including 0 mm rather than negative. Reporting results as either negative or positive is not appropriate.

Refer to *Tuberculosis Prevention and Control Guidelines for Alberta – Case Detection and LTBI Screening Programs: Testing to Identify Infection with Mycobacterium Tuberculosis, Administration, Reading and Interpretation of TST* for more information.\(^2\)

**Possible reactions following TST**

**Local:**

- Pain, pruritus, discomfort and bruising at the test site.\(^1\)
- Localized redness or rash (without induration) may occur within 12 hours of testing.\(^1\)
- Rarely blistering ulceration and/or necrosis may appear at the test site and may result in scarring.\(^2\)
Systemic:
- Severe systemic hypersensitivity reactions have been reported within 24 hours of administration but are rare.
- Pyrexia and generalized rash\(^1\)

Refer to: *Adverse Events Following Immunization (AEFI), Policy for Alberta Immunization Providers*.\(^4\)

<table>
<thead>
<tr>
<th>Pregnancy</th>
<th>While pregnancy is not a contraindication to the administration of TST, routine screening tests in the absence of symptoms, HIV infection or recent contact with an infectious TB case are usually deferred until after delivery.(^2)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lactation</td>
<td>Breastfeeding women may receive TST.</td>
</tr>
</tbody>
</table>

**References**