Pediatric Tuberculosis

TB Burden in India

Highest TB burden country (1/5th of global)

 17th among 22 high burden countries in terms of TB incidence.

WHO Report 2009

Pediatric TB: Characteristics

- Infection occurs for first time
- Well marked enlargement of regional lymphatic nodes
- Tubercle bacilli spread by lymphatic & hematogenous route
- Cavity in primary TB is thin walled
- Primary infection ususlly non-infectious
- Mortality mainly due to extrapulmonary TB
- Healing by mainly calcification

Adult TB: Characteristics

- Tissues already exposed.
- Lowering of immune defences locally in lungs, leads to reactivation & mainly locally progressive disease.
- No significant regional or hilar LAP.
- Localized to one organ.
- Hematogenous spread uncommon.
- Main cause of death.
- Healing of lesions by fibrosis.

Pathogenesis

Primary TB:

- Negative Mx to Positive Mx
- Airborne usually
- Incubation period: 4-8 weeks
- Primary focus: Apex of upper or lower lobe
- Primary focus in the lung, lymphangitis & enlarged hilar LN known as Primary Complex of Ranke

Pathogenesis cont...

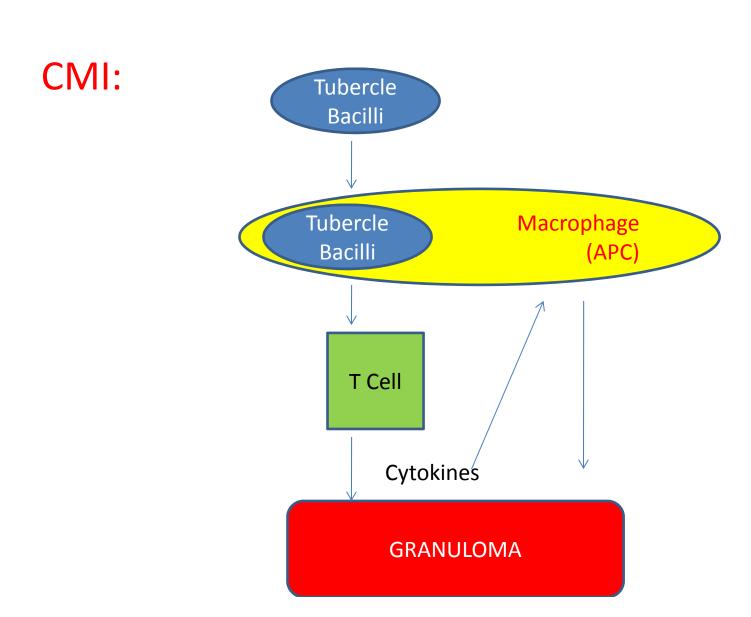
Intracellular infection

Spreads via lymphatics & blood stream

Delayed type immunological reactivity

Controlled by T lymphocytes.

Host immune response to TB



Host immune response to TB cont ...

DTH:

Due to T suppressor cells

Specific or non specific

 Leads to destruction of host tissues & may contain bacteria.

Tuberculosis without tubercles

Response to TB infection

- 1. Only infection & no disease.
- 2. Primary complex development.
- 3. Progressive disease
- 4. Granulomatous necrotizing or destructive cavitary TB.
- 5. Pneumonic form with no cavity

TB Spectrum

Parenchymal Progression

- PC
- HPC
- Pneumonia
- Massive pneumonia
- Primary cavity
- Bronchopneumonia
- Pleurisy

Complicated LN TB

Mediastinal LN enlargement

Partial bronchial obstruction

Complete bronchial obstruction

Rupture of subcarinal LN

Hematogenous spread

- Miliary TB
- CNS TB
- Disseminated TB
- Dactylitis
- Isolated bone & joint involvement

Chronic Pulmonary Tuberculosis

Assmann's focus

Pulmonary infiltration

CPT: Cavitary

Fibrous

Fibrocaseous

Impact of BCG Vaccination

Intrathoracic versus Extrathoracic

RNTCP

Based on internationally recommended DOTS

Launched in 1997

Expanded in phased manner

Support from World Bank

Objectives of RNTCP

 To achieve & maintain cure rate of at least 85% among new sputum positive (NSP) patients

 To achieve & maintain case detection of at least 70% of estimated NSP cases in the community.

RNTCP cont...

PWB started since 2006