

Hospital Worker With TB May Have Exposed 500 Patients

By RICHARD PÉREZ-PEÑA
New York Times
March 16, 2007

An employee at a Bronx hospital has tuberculosis and may have exposed hundreds of patients and co-workers, including more than 200 newborn babies, officials said yesterday. They appealed to people who could have been infected to arrange for testing and treatment.

The employee, whom officials identified only as a woman, worked in the maternity ward, the nursery, the neonatal intensive care unit and the psychiatric ward at St. Barnabas Hospital, in the East Tremont section of the Bronx. Her TB was diagnosed on Jan. 29.

Hospital and city officials did not disclose what kind of job the woman held, but expressed concern that those she had contact with, including infants, were especially vulnerable.

The risk of developing the disease "is greatest in the first year after infection," said Dr. Sonal S. Munsiff, director of the Bureau of Tuberculosis Control. "And in some groups, such as people with immunosuppression or very young babies whose immune systems haven't developed yet, the risk is much, much higher."

The city's Department of Health and Mental Hygiene and hospital officials have combed through hospital records and are trying to track down 532 patients, including 238 infants, and more than 100 other people, including people who have worked at St. Barnabas, who they believe might have been exposed.

Officials said they decided to disclose the woman's infection after they had trouble contacting many of the people they believed to be at risk.

They asked any patients or employees who were in one of the wards where the woman worked between Nov. 1 and Jan. 24 — the last day she worked at the hospital — to call the hospital at (718) 960-3624, or the city's information line, 311. Because the hospital worker showed no signs of illness until late January, officials say they are confident she would not have been contagious before Nov. 1.

City health officials stressed that TB is neither uncommon nor highly infectious, and is usually passed from person to person only through prolonged close-quarters contact. In most cases, the disease strikes the lungs, causing a cough that can spread the bacteria that cause the disease. Untreated, most cases of active tuberculosis are eventually fatal.

Dr. Munsiff said that as much as 10 percent of the city's population is infected with the bacteria. The great majority of those people have a dormant infection and cannot infect others, and many people go decades with the germs in their system, with no resulting illness.

But the germs can suddenly become active and multiply, and the patient then develops TB.

There are about 1,000 new tuberculosis cases diagnosed annually in the city, Dr. Munsiff said, about two-thirds of them in foreign-born people, because the disease is more common in some other parts of the world.

City and hospital officials would not say what country the infected hospital worker is from. “She is foreign born, but she is a longtime resident of the United States, and our understanding is that she had not recently been overseas,” said Fred Winters, a hospital spokesman.

Dr. Munsiff said that 4 to 5 percent of the city’s cases of active tuberculosis — 40 to 50 people each year — are health care workers, who are at higher risk than most people because they spend so much time around sick people.

Antibiotics work well against the strain of bacteria that infected the hospital worker, officials said, unlike their performance against some strains that have become drug-resistant. Even so, getting rid of the infection requires taking antibiotics for nine months.

Sometime in late January, the sick hospital employee had a “persistent cough and shortness of breath, and she went to the emergency room at St. Barnabas on the 29th,” Mr. Winters said.

Chest X-rays confirmed the presence of tuberculosis, and she was put into isolation and given antibiotics, he said.

New York State requires that hospital workers have annual tuberculosis tests, called P.P.D. tests, which involve pricking the skin to see if the immune system produces a reaction. But the test is of limited value.

Anyone who has ever been infected can test positive on the P.P.D., even if the infection is dormant, and even if it has been eliminated with antibiotics. So a significant part of the population tests positive, as the St. Barnabas worker had for a number of years, Mr. Winters said.

In addition, people who are infected, and even people who actually suffer from the disease, can test negative.

http://www.nytimes.com/2007/03/16/nyregion/16health.html?_r=1&oref=slogin