CDC Investigation of Traveler with Extensively Drug-Resistant Tuberculosis (XDR TB): Questions and Answers

What happened?
CDC is currently investigating a case of extensively drug resistant tuberculosis (XDR TB). The case involves a U.S. citizen with potentially infectious XDR TB who traveled to and from Europe on commercial flights between May 12 and May 24, and then re-entered the U.S. at the Canada-U.S. border via automobile. Since May 25, the patient has been hospitalized in airborne isolation or wearing an appropriate mask, and is now receiving medical therapy for XDR TB.

What are the dates and flight numbers for this investigation?
- Air France # 385 / Delta # 8517, departing Atlanta May 12th; arriving in Paris May 13th
- Czech Air # 0104, departing from Prague and arriving in Montreal May 24th

What is XDR TB?
XDR TB is a rare type of tuberculosis that is resistant to nearly all drugs used to treat TB disease.

What is CDC doing?
CDC is working with U.S. state and local health departments, International Ministries of Health, the airline industry, and the World Health Organization to notify and follow up passengers and crew who may be at risk for exposure to XDR TB. Each country involved in the investigation is determining guidance for its own residents.

Did the patient know he had TB before he got on these flights?
Our understanding from the county health officials, who were responsible for managing the patient when he initially presented with TB, is that he was aware of his diagnosis. When he departed, he may not have been aware of the fact that he had extensively drug resistant tuberculosis (XDR TB, see www.cdc.gov/tb/pubs/tbfactsheets/xdrtb.htm).

Why did the patient travel?
Normally, when a patient has tuberculosis, he or she is influenced through a covenant of trust to ensure that they don't put themselves in situations where they could potentially expose others. In this case, the patient had compelling personal reasons for traveling and made the decision to go ahead and meet those personal responsibilities.

Were public health officials aware that this man was leaving the country?
The local health officials have been involved in the care of this patient from the moment that they were aware of the TB diagnosis and he was being seen in the clinic. Our understanding, from conversations with the health officials, is that the issue of travel was discussed. The patient was advised that it was not appropriate to travel when you have TB. This situation comes up often when people have TB or other communicable diseases. We have a high success record using voluntary means of information and advice. CDC was not aware that the patient had decided to leave the country.

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How did the patient return to the United States and then Georgia?
On May 12, the patient departed Atlanta on and arrived in Paris on May 13 on Air France # 385 / Delta # 8517. On May 24, the patient flew to Canada on Czech Air # 0104 and then entered the United States by car.

It was not safe for the patient to fly on commercial aircraft, so government resources were used to bring the patient from New York back to Georgia in the safest and quickest possible way. In New York, the patient was put into isolation fairly soon after his arrival he was later flown to Georgia, his state of residence, on the CDC aircraft, a step that we were not obligated to take under our quarantine authorities, but one that we felt was fair and appropriate given that he is a citizen of Georgia. His family members are here and his disease does require prolonged treatment.

How many people were on the planes?
The airlines involved in the investigation are large transcontinental airlines and they are generally full of passengers. Air France # 385/Delta # 8517 had 433 passengers and 18 crew members. The Czech Air # 0104 had 191 passengers and 9 crew members.

Who should be tested?
The World Health Organization has guidelines for follow-up and care of persons who may have been exposed to someone with TB during air travel. In accordance with these guidelines, CDC recommends that all U.S. citizens and residents who were passengers or crew on these flights be evaluated and tested for TB infection.

The following persons are the highest priority for evaluation:

- Passengers seated in rows 28-32 on Air France # 385/Delta # 8517, departing Atlanta May 12th; arriving in Paris May 13th
- Passengers seated in rows 10-14 on Czech Air # 0104, departing from Prague and arriving in Montreal May 24th
- Flight crew members working in the same cabin on each of the flights listed above

Why is CDC not following up with passengers who were on the shorter flights with the XDR TB patient?
Both CDC and the World Health Organization (WHO) consider the risk of infection to travelers on flights under eight hours to be very low. However, if you were a passenger on one of the flights that were shorter than 8 hours and are concerned, check with your local public health department or your primary care physician about being tested for TB.

Can a person who was on the same flight with the XDR TB patient give TB to others?
Only a person with active TB disease can transmit TB germs to others. If you have been around someone with TB disease (or XDR TB disease), you can get TB infection. However, not everyone infected with TB germs becomes sick. As a result, two TB-related conditions exist: latent TB infection (www.cdc.gov/tb/faqs/qa_latenttbinf.htm) and active TB disease (www.cdc.gov/tb/faqs/qa_TBDisease.htm). A person with latent TB infection cannot spread germs to other people, but can develop active TB disease in the future. People with medical conditions or on medications that suppress the immune system are at higher risk to become ill with active TB disease.

Am I at risk for exposure if I took the same flight the following day as the XDR TB patient, or was in the same boarding area?
Persons who become infected usually have been exposed for several hours (or days) in poorly ventilated or crowded environments. Boarding the same plane the next day or being in the same boarding area

would not warrant evaluation. TB is not spread through countertops, chairs, doorknobs, or other surfaces where a TB patient has been.

However, if travelers are concerned about exposure, check with your state or local health department or your primary care provider about being tested for TB.

Where did the patient become infected with XDR TB?
The source of the patient's TB is still under investigation. CDC is conducting something called an Epi Aid, which means our epidemic intelligence service officers are actively participating and investigating not only opportunities for exposure to passengers, crew, family members, and others, but also looking backward to try to determine where the original infection occurred. That is an ongoing investigation.

Why was a federal order of isolation issued?
After the patient had left the jurisdiction, the TB organism was identified as extensively drug resistant. A federal order of isolation under the Public Health Service Act that gives CDC statutory responsibility for issuing quarantine orders was executed to protect the public.

This patient was ordered to be in isolation and is required to stay in isolation until the responsible public health official deems that he is no longer infectious to others. The patient currently is in airborne isolation and is undergoing medical evaluation.

Under what circumstances was the federal isolation order executed?
After speaking to CDC authorities on May 25, the patient voluntarily drove himself to the isolation hospital in New York City to be evaluated. He was given instructions on how to do that safely without putting public health at risk. He was admitted and served a provisional quarantine order that held for 72 hours while this assessment was going on. The patient was asked if he preferred to remain in New York City for his treatment or if he wanted to come home to Atlanta. He preferred to come home and we ensured the safe transport for that return to Atlanta on Monday, May 28 via the CDC plane.

He was issued a federal isolation order on arrival in Atlanta to cover the period of time for us to hand over the jurisdiction and public health management of this case to the state and local authorities in Fulton County in the State of Georgia where he is a resident.

The order is in effect until it is either rescinded and the responsibility is transferred over to the local jurisdiction or until determined by the CDC Director that he is no longer a public health threat.

Has a federal order of isolation been issued at any other time?
Taking a measure such as issuing an order of isolation is unusual. The last order was issued in 1963.

What was the isolation order that was issued in 1963?
In 1963, the statute was used for quarantine, not isolation, of someone who had been exposed to smallpox. The decision was made to err on the side of caution and implement a federal quarantine requirement for the person until they were outside of their period of incubation.

Who should I contact for additional information?

- If you were a passenger on the flights in question, please contact your city TB control office (see www.cdc.gov/tb/xdrtb/pdf/tbcontrol-city.pdf), state TB control office (see www.cdc.gov/tb/xdrtb/pdf/tbcontrol-state.pdf), or CDC at 800-CDC-INFO (800-232-4636).
- For general inquiries, contact CDC INFO:

  - 800-CDC-INFO (English and Spanish)
  - 800-243-7889 (TTY)
- Visit CDC's TB websites:
  - www.cdc.gov/tb
  - www.cdc.gov/tb/xdrtb
- Read educational booklets:
  - The TB Contact Investigation (www.cdc.gov/tb/pubs/pamphlets/TB_contact_investigation.pdf)
  - What You Need to Know About TB Infection (www.cdc.gov/tb/pubs/pamphlets/TB_infection.pdf)