



## Sudan arrivals – Tuberculosis (TB) screening and other infectious disease recommendations (revised)

This document is for:

- Integrated care boards (ICBs) & Primary Care.

It applies to:

- British and non-British nationals recently repatriated from Sudan (April-May 2023).

This advice:

- Provides Tuberculosis (TB) screening and other infectious disease recommendations for practitioners for those repatriated from Sudan.
- Complements existing [Migrant Health Guide](#) advice.
- Complements existing: [Tuberculosis \(TB\): migrant health guide](#)

### Background

UK TB control strategies focus on early detection and treatment of TB in groups who are at high risk of TB infection and disease, including migrants from high incidence countries. There are separate national screening programmes for the detection of active TB disease and latent TB in migrants in the UK. Specific migrant groups from high incidence countries are often screened for active TB disease before entry to the UK and for latent TB infection after entry to the UK.

Current instability and conflict in Khartoum has led to a breakdown in health services and a lack of power, water and food. Whilst most of those arriving in the UK from Sudan are British nationals, there has also been a small number of Sudanese and other foreign nationals.

### Active TB Disease

Sudan is a country with a high prevalence of Tuberculosis, with an incidence rate of 58 per 100,000.

Non-British nationals who have been resident in Sudan (for more than 6 months) and are arriving the UK for more than 6 months are ordinarily required to have screening for **active**

**TB disease.** For people aged over 11 years (who are not pregnant), this includes: a [symptom check](#), chest X-ray and sputum assessment, where appropriate (person is coughing and able to produce sputum). Children aged 0 to 11 years have a symptom check.

Screening usually occurs before departure, as part of the visa application process (non-British nationals only).

Given the rapid timeframe associated with the movement of recent arrivals to the UK, the normal requirement for pre-entry screening in eligible non-British nationals is assumed not to have occurred.

For non-British nationals who would normally be required to have screening for active TB before UK entry: once these individuals have arrived in the UK and in settled accommodation, as soon as feasible, UKHSA recommends the following steps:

- Early registration with primary care
- For those living in Sudan for more than 6 months, screening for active TB disease. This will include a symptom check and may include a chest x-ray for those older than 11 years. Assessment and chest x-rays can be requested directly in primary care where pathways exist, or via referral to the local TB service if required.
- If the person has symptoms or an abnormal x-ray they should be referred for appropriate specialist assessment and investigation within one working day in line with NICE guidance

Please note that British Nationals do not require a visa for UK entry. Systematic screening for active TB disease would not normally be required and is therefore not recommended. There is currently insufficient evidence to warrant introducing systematic active TB screening over and above existing border symptom checks that were undertaken for evacuees.

## **Latent TB Infection (LTBI)**

Sudan is classified by the UK government as a 'Sub Saharan' African country and therefore LTBI testing via a single IGRA test should be offered to all arrivals (both British Nationals and non-British nationals) from Sudan who meet the following criteria:

- 16 to 35 years old
- arrived in England in the last 5 years (including entry via other countries)
- born or lived for more than 6 months in sub-Saharan Africa **or** countries where the TB incidence is more than 150 per 100,000 population.
- no previous history of TB or LTBI (clinically assess for new exposure)
- not previously screened for LTBI in the UK

[Programmatic NHSE LTBI screening](#) is currently only available in higher TB incidence areas in England. In areas where programmatic LTBI testing and treatment is not established, screening for latent TB infection is still recommended. Practitioners can check locally available pathways with their local commissioners. IGRA tests can be requested directly in primary care where pathways exist, or via referral to the local TB service.

Patients with positive LTBI screening should be referred to the local specialist TB service for assessment and treatment.

## **Additional recommendations around TB:**

Offer [vaccination against TB](#) for those aged under 16 who do not have a history of BCG vaccination and are tuberculin negative, including infants under the age of one.

It is also important to maintain long-term vigilance for symptoms of TB within these populations even if the initial screening is negative.

Emphasise that if a patient tests positive, treatment is free and most treatment can be provided on an outpatient basis.

For more information on TB see the [migrant health guide on tuberculosis](#).

## **Recommendations around other infectious diseases for all arrivals, both British and non-British nationals from Sudan**

For arrivals from Sudan, UKHSA recommends the following steps:

- a. Early registration with primary care
- b. Ensure individuals are up to date with the [UK routine immunisation schedule](#). If not up to date, minimum requirements are a polio vaccine at the first visit and early completion or start of MMR vaccination especially in children. There are [translations](#) available for the immunisation leaflet with information for migrants.
- c. [Screening](#) for hepatitis B, hepatitis C and HIV and active referral to relevant treatment programmes in the UK. For hepatitis B, where a household member is positive, all other individuals should be offered HBV vaccination

Healthcare providers should be aware of higher incidence of certain infectious diseases in Sudan and remain alert for the following:

- d. Acute Infectious diseases – malaria, measles, typhoid
- e. Less common acute infectious diseases such as dengue and CCHF
- f. Chronic infectious diseases – TB, Hepatitis B, Hepatitis C, HIV