**Tuberculosis in pregnancy in the UK: A national study to describe disease incidence, prognostic factors, management and outcomes**

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BACKGROUND: Tuberculosis (TB) has been identified as a priority infectious disease in the UK. Incidence is rising, with an increase of 6% in the number of cases reported nationally between 2000 and 2001 (1). Recent studies have identified significant differences in the epidemiology of TB occurring in pregnancy compared with the non-pregnant population, which impact significantly on diagnosis and management. There have been no national studies, and information about pregnancy outcomes are lacking.

AIM: To determine the national incidence, prognostic factors, management and sequelae of TB in pregnancy in the UK.

METHODS: A national surveillance study was undertaken using the UK Obstetric Surveillance System (UKOSS) between February 2005 and August 2006.

RESULTS: 100% of UK consultant-led obstetric units contributed data to UKOSS. There were 52 confirmed cases, representing an estimated incidence of 1 in 21,900 total births (95% confidence interval (CI) 1/17,200 to 1/30,100). Detailed data were collected on 31 women. All the women were non-white: 55% African, 39% Asian and 6% other. Only one woman had been born in the UK. Of the remainder, 72% arrived in the UK within the last five years. 29% of women were primigravid and 29% aged over 35. Four women (13%) had HIV co-infection and 57% of women presented with extrapulmonary disease. The median gestational age at onset of symptoms was 22.5 weeks (range 4-39). The median gestational age at delivery was 37 weeks (range 24-42). One pregnancy was lost before 24 weeks gestation. One women died from her disease (case fatality 3.2%, 95% CI 0-10.6%). Three women were reported to have additional severe morbidities, including adult respiratory distress syndrome, a cerebrovascular accident and sepsicaemia. There was one neonatal death amongst the 29 infants for whom outcomes are known (perinatal mortality rate 34 per 1000 births, 95% CI 1 to 178).

CONCLUSIONS: Tuberculosis in pregnancy in the UK is uncommon but may be life threatening. The disease appears to be limited to ethnic minority women, most commonly recent immigrants. Extra-pulmonary disease is more common than pulmonary disease and may therefore present a diagnostic challenge.