

# The TB / HIV Registry

## Surveillance Report on TB/HIV co-infection in Hong Kong (2022)

Tuberculosis & Chest Service / Special Preventive Programme  
Public Health Services Branch  
Centre for Health Protection  
Department of Health  
Hong Kong

A total of 15 cases with TB-HIV co-infection were reported to the TB-HIV Registry in 2022. The cumulative number of cases reported to the TB-HIV Registry from all sources as in 2022 was 808 (Table 1).

Information on TB as a primary AIDS-defining illness is available in 14 out of 15 cases reported to the TB-HIV Registry in 2022. Of these 14 cases, 8 (57.1%) had TB as a primary AIDS-defining illness (Table 2).

The drug susceptibility pattern among culture-positive (sputum or other specimens) TB-HIV cases for the years 1996 to 2022 is shown in Table 3. Eleven patients reported to the TB-HIV Registry had a positive sputum and/or other specimen culture in 2022. Two cases had disease due to *Mycobacterium tuberculosis* resistant to streptomycin, one case had disease due to *Mycobacterium tuberculosis* resistant to isoniazid and streptomycin. Among all the 568 cases reported to TB-HIV Registry with a positive sputum or other specimen culture between 1996 and 2022, 9 (1.6%) had MDRTB. There is no XDR-TB case detected among the reported TB-HIV cases so far. DH will continue to monitor prevalence of drug resistance in the context of HIV.

Table 4 shows the characteristics of 15 patients seen at chest clinics and/or Special Preventive Programme (SPP) in 2022. The median CD4 count was 128/ $\mu$ L at time of TB diagnosis. Extra-pulmonary involvement (irrespective of lung involvement) is found in more than half of the patients.

**Table 1: Total number of TB-HIV cases reported to TB-HIV Registry, all sources from 1996 to 2022 <sup>(1)</sup>**

Year	Number of TB-HIV cases <sup>(2)</sup>
1996	22
1997	19
1998	22
1999	25
2000	24
2001	34
2002	22
2003	28
2004	35
2005	42
2006	50
2007	56
2008	50
2009	38
2010	25
2011	28
2012	20
2013	21
2014	25
2015	24
2016	36
2017	31
2018	29
2019	39
2020	18
2021	30
2022	15
Total	808

## Notes:

- (1) Including cases reported from all sources (chest clinics, SPP, HA hospitals and private centres).
- (2) Some of the figures in the table for the previous years have been updated after
- ( i ) taking out some mismatched cases and cases with a revised diagnosis;
  - ( ii ) adding some cases which were previously unreported.

**Table 2: TB as primary AIDS-defining illness among 622 cases reported to chest clinics and/or SPP from 1996 to 2022 <sup>(1)</sup>**

Year	TB as primary AIDS-defining illness					Total
	Yes			No	Information not available	
	Extra-pulmonary	Pulmonary and TB cervical lymph node with CD4 < 200 µL	Subtotal			
1996	1	7	8	1	0	9
1997	2	3	5	2	0	7
1998	6	3	9	3	0	12
1999	7	6	13	3	0	16
2000	3	4	7	5	0	12
2001	4	6	10	7	0	17
2002	4	9	13	2	0	15
2003	1	10	11	5	0	16
2004	5	7	12	11	0	23
2005	8	14	22	7	0	29
2006	9	19	28	7	0	35
2007	10	17	27	8	2	37
2008	14	13	27	6	0	33
2009	9	3	12	6	5	23
2010	4	10	14	5	3	22
2011	6	8	14	8	6	28
2012	4	9	13	5	2	20
2013	7	10	17	1	3	21
2014	7	8	15	9	1	25
2015	7	5	12	8	4	24
2016	8	8	16	17	3	36
2017	8	6	14	12	5	31
2018	5	8	13	11	5	29
2019	13	7	20	19	0	39
2020	3	5	8	9	1	18
2021	10	11	21	7	2	30
2022	4	4	8	6	1	15
Total	169	220	389	190	43	622

Note:

- (1) Some of the figures in the table for the previous years have been updated. Of all the cases reported to the TB-HIV Registry from 1996 to 2022, 622 cases were seen at chest clinics and/or SPP. The table is compiled basing on data of these 622 cases.

**Table 3: Drug susceptibility pattern among culture positive (sputum and/or other specimens) TB-HIV cases from TB-HIV Registry, all sources from 1996 to 2022**

Year	Susceptible to SHRE	Any resistance (non-MDR/XDR)	MDR	XDR	Drug susceptibility unknown	Total number of culture positive cases
1996	7	1	0	0	0	8
1997	5	1	0	0	0	6
1998	13	1	0	0	0	14
1999	16	4	1	0	0	21
2000	13	2	0	0	0	15
2001	23	5	0	0	0	28
2002	11	3	1	0	0	15
2003	18	2	1	0	0	21
2004	20	6	0	0	0	26
2005	29	5	0	0	0	34
2006	32	3	0	0	0	35
2007	30	7	1	0	0	38
2008	30	3	0	0	0	33
2009	22	7	0	0	0	29
2010	12	2	0	0	0	14
2011	12	4	0	0	0	16
2012	13	2	1	0	0	16
2013	13	5	0	0	0	18
2014	11	7	0	0	1	19
2015	14	1	2	0	2	19
2016	27	3	2 <sup>(1)</sup>	0	0	32
2017	19	2	0 <sup>(1)</sup>	0	0	21
2018	16	2	0	0	0	18
2019	27	1	0	0	0	28
2020	11	0	0	0	0	11
2021	21	1	0	0	0	22
2022	8	3	0	0	0	11
Total	473	83	9	0	3	568

Note:

(1) Excluding one case with clinical specimen cultured negative but rpo B mutation detected.

**Table 4: Characteristics of 15 TB-HIV cases reported from chest clinics and SPP in 2022**

	Number	Proportion
Age distribution		
0 to 19	0	0.0%
20 to 39	5	33.3%
40 to 59	8	53.3%
60+	2	13.3%
Sex distribution		
Male	12	80.0%
Female	3	20.0%
Ethnicity		
Chinese	9	60.0%
Asians, non-Chinese	6	40.0%
African	0	0.0%
Others	0	0.0%
Case category		
New case	13	86.7%
Relapse	1	6.7%
Treatment after default	1	6.7%
Failure of previous treatment	0	0.0%
Others	0	0.0%
Unknown	0	0.0%
TB as a primary AIDS-defining illness N = 14 <sup>(1)</sup>		
Yes	8	57.1%
No	6	42.9%
CD4 count at time of co-infection (median, IQR) N = 14 <sup>(1)</sup>	127.5 (45.0-218.3)/uL	
Anti-retroviral therapy at time of co-infection		
Yes	5	33.3%
No	10	66.7%
Presence of extra-pulmonary TB (irrespective of lung involvement)		
Yes	9	60.0%
No	6	40.0%
Extent of Respiratory TB N = 11 <sup>(1)</sup>		
Minimal	5	45.5%
Moderate	3	27.3%
Extensive	3	27.3%
Sputum bacteriological status (pre-treatment) N = 13 <sup>(1)</sup>		
Smear + culture +	4	30.8%
Smear - culture +	6	46.2%
Smear + culture -	0	0.0%
Smear - culture -	3	23.1%
Drug resistance pattern (pre-treatment) (based on sputum and/or other specimen culture) N = 11 <sup>(1)</sup>		
Susceptible to SHRE	8	72.7%
Resistant to streptomycin alone	2	18.2%
Resistant to streptomycin and isoniazid	1	9.1%
Resistant to rifampicin alone	0	0.0%
MDR	0	0.0%
XDR	0	0.0%

Note:

(1) N = number of cases available for analysis, N = 15 if not specified