López-De Fede appointed to National Advisory Council on TB

Columbia, SC — Dr. Ana López-De Fede, director of health and family studies at the University of South Carolina Institute for Families in Society, has been appointed to the Advisory Council for the Elimination of Tuberculosis for the Centers for Disease Control and Prevention (CDC). The appointment by Michael O. Leavitt, U.S. Secretary of Health and Human Services, reflects López-De Fede’s work on the socio-cultural dimensions of health and her commitment to the elimination of tuberculosis.

Tuberculosis (TB), a contagious but curable bacterial disease that spreads through the air, can attack any part of the body, but usually attacks the lungs, and can cause serious illness and even death if not treated. While many believe that TB has been long eradicated, it remains a societal threat, and South Carolina has the highest number of TB cases among the Southeastern states.

The advisory council will provide advice and recommendations on the elimination of tuberculosis to the U.S. Secretary and Assistant Secretary for Health and Human Services and the CDC director. The council also will make recommendations for policies, strategies, objectives and priorities; address the development and application of new technologies; provide guidance and review on CDC’s Tuberculosis Prevention Research portfolio and programs; and review progress on the elimination of the disease.

Through a partnership with the S.C. Department of Health and Environmental Control, López-De Fede has been working with the CDC to improve TB programs for African Americans in South Carolina. She comments, “The opportunity to serve as a member of the Advisory Council for the Elimination of Tuberculosis for the Centers for Disease Control and Prevention (CDC) is a privilege. It is an opportunity to work in area with the potential to directly affect the health and well-being of our most vulnerable South Carolinians.”

For more information on research results or to contact Dr. López-De Fede, please call Renée Gibson at the Institute for Families in Society, 777-1121. For more information on tuberculosis, contact for SC Department of Health and Environmental Control – TB Control Division at 803-898-0539.

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FACT SHEET

TB Defined
Tuberculosis (TB) is a contagious but curable bacterial disease that spreads through the air. It can attack any part of the body, but usually attacks the lungs and can cause serious illness and even death if not treated. The disease can be either active or latent, which means the bacteria become inactive, but remain alive in the body and can become active later. Because it is air-borne, TB is often transmitted in over-crowded conditions, such as correctional facilities and shelters.

The Rise and Fall of Tuberculosis
Starting in the 1940s, scientists discovered the first of several medicines now used to treat TB. As a result, TB slowly began to decrease in the United States. But in the 1970s and early 1980s, the world became complacent and TB control efforts were neglected. As a result, between 1985 and 1992, the number of TB cases increased. With increased funding and attention to the TB problem, we have had a steady decline in the number of persons with TB in the U.S. since 1992, but TB is still a problem. Currently, case rates are 4.9 per 100,000 for U.S.-born Whites and 9.2 per 100,000 for U.S.-born African Americans. African Americans comprise 45% of all TB cases with a third (35%) residing in eight Southeastern states. Specifically, South Carolina leads the Southeastern states with the highest number of TB cases overall and is among the top three with the highest number of cases among African Americans.

Quote
“Tuberculosis strikes the most vulnerable in our society,” says Dr. López-De Fede. “Although it is a treatable and curable disease that can be eliminated in our lifetime, the first step towards elimination starts with acknowledging that tuberculosis exists among us. The second step is making a commitment to ending the conditions that foster tuberculosis — poverty, racism, homelessness, and the lack of access to health care.”

Research Findings on Socio-Cultural Factors of TB Prevalence among African Americans

1) Lack of knowledge of TB is a significant barrier to stopping TB in South Carolina.
   - Fear and the stigma associated with a TB diagnosis results in late identification of the disease, failure to contact others exposed to TB, and the completion of treatment.
   - Misinformation about the causes of TB increases the stigma feeding the fear and stigma.

2) Improving TB service is hindered by lack of resources and effective strategies to reach African Americans.
   - Individuals with identified cases of TB often do not have insurance or workers compensation severely limiting their ability to remain economically solvent through treatment.
   - Lack of resources to enhance contact and communication between individuals and providers.
   - Increase need to develop, implement, refine, and evaluate culturally sensitive community-based models to enhance African American participation in early detection and follow-up services.