

Ethnicity and Infectious Disease



H Mossop, A Bodley-Tickell, A Banerjee, D Hunt
Regional Surveillance Unit, HPA – West Midlands

September 2006

Overview



- Why analyse data by ethnicity
- Problems with using ethnicity
- Conclusions

Why analyse data by ethnicity?

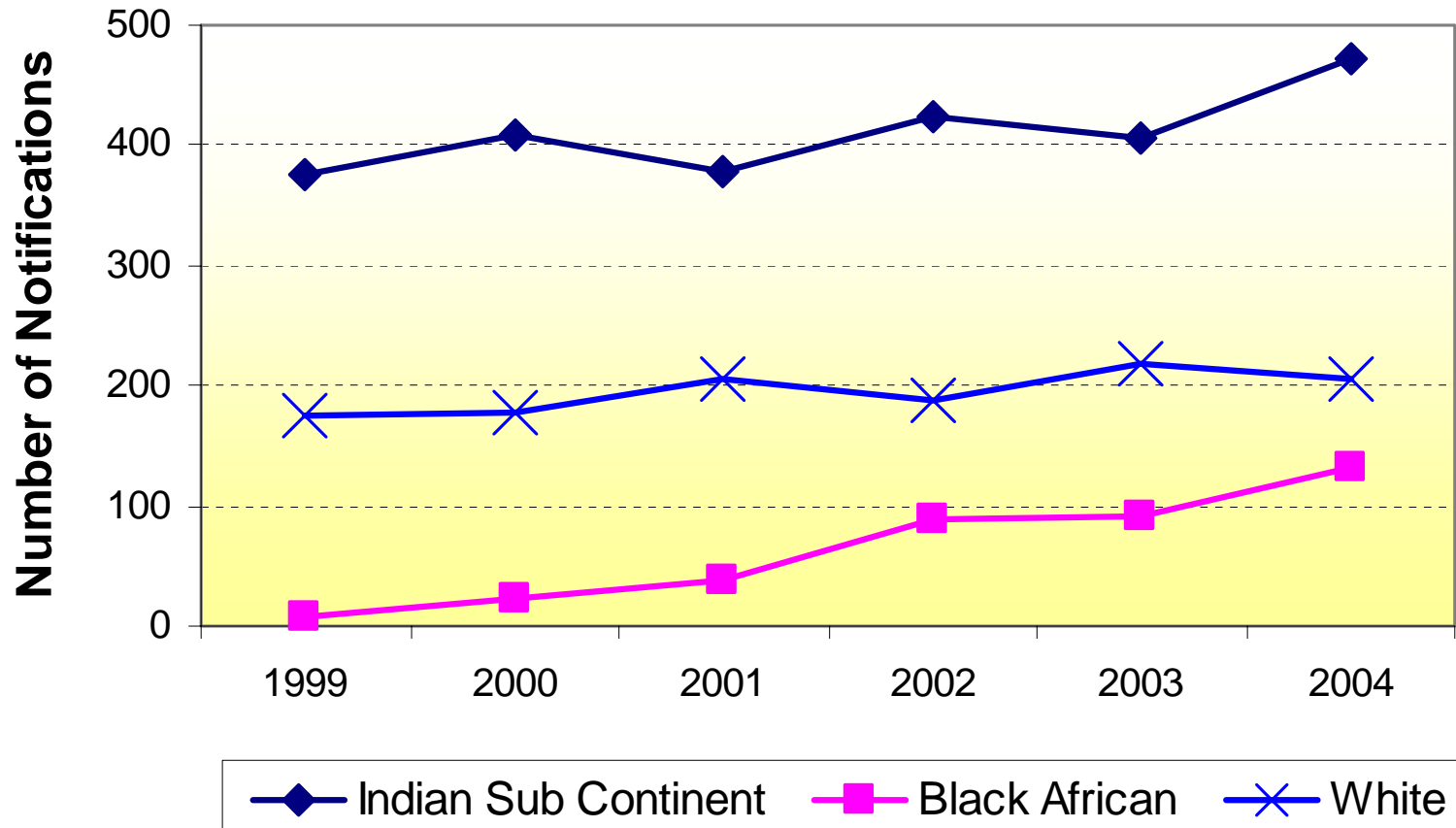


- Identify Trends

Identify Trends



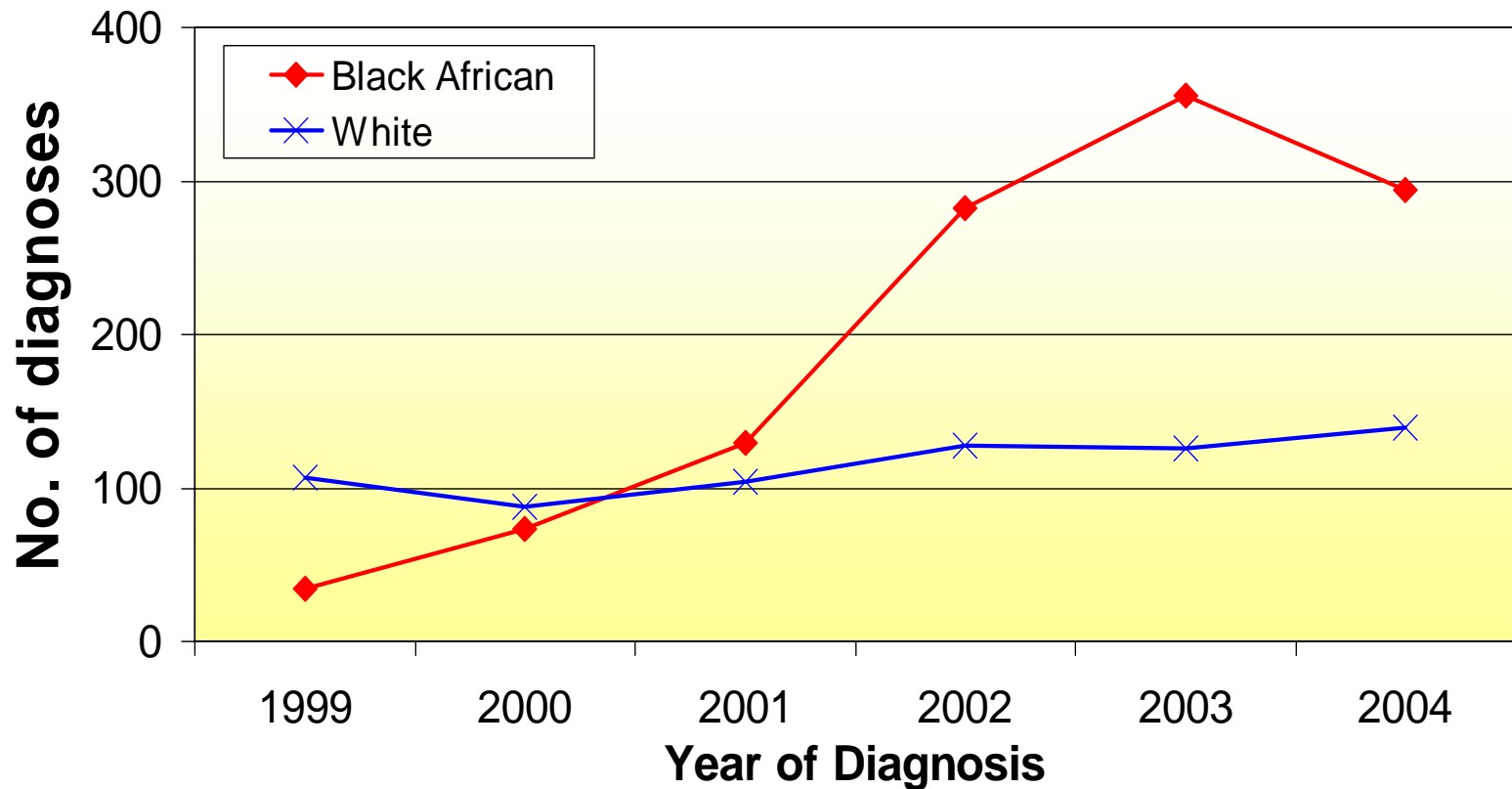
Notifications of Tuberculosis by Ethnic Group in the West Midlands, 1999 - 2004



Identify Trends



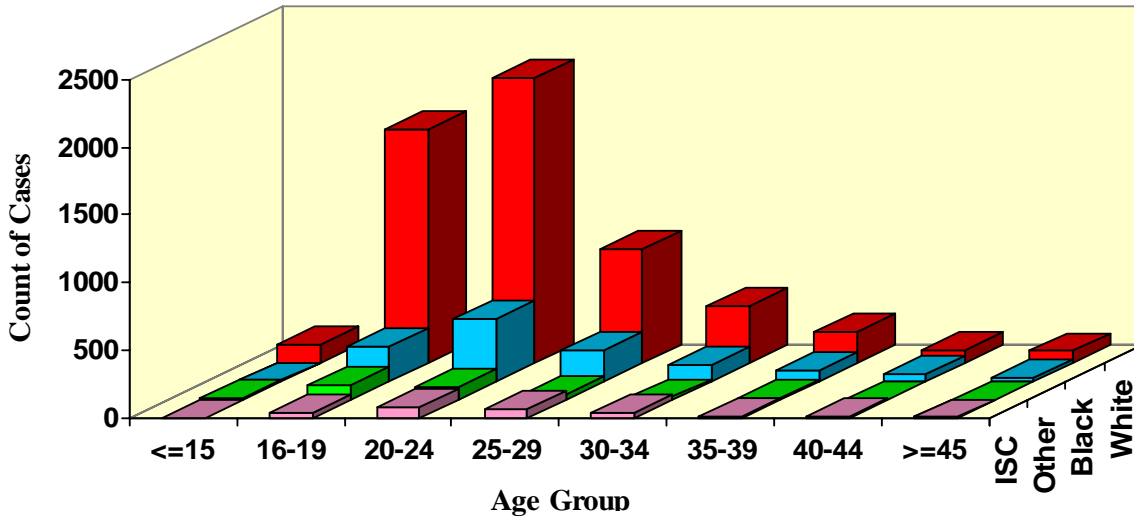
New HIV Diagnoses in Black African and White ethnic Groups, 1999 - 2004



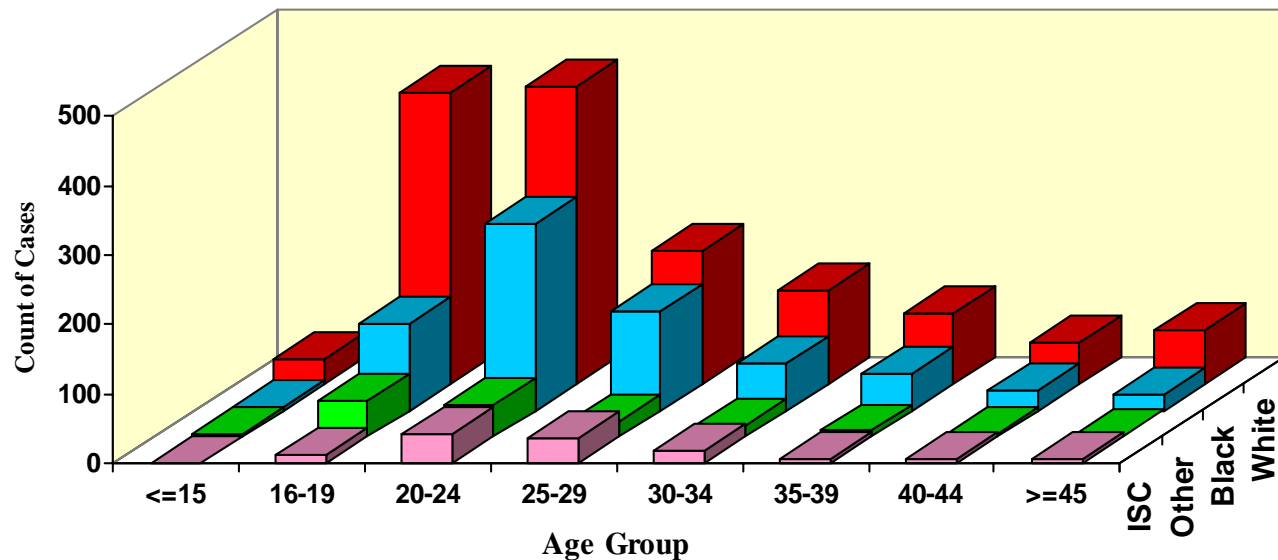
Identify Trends



Chlamydia in the West Midlands 2004



Gonorrhoea in the West Midlands 2004



Why analyse data by ethnicity?

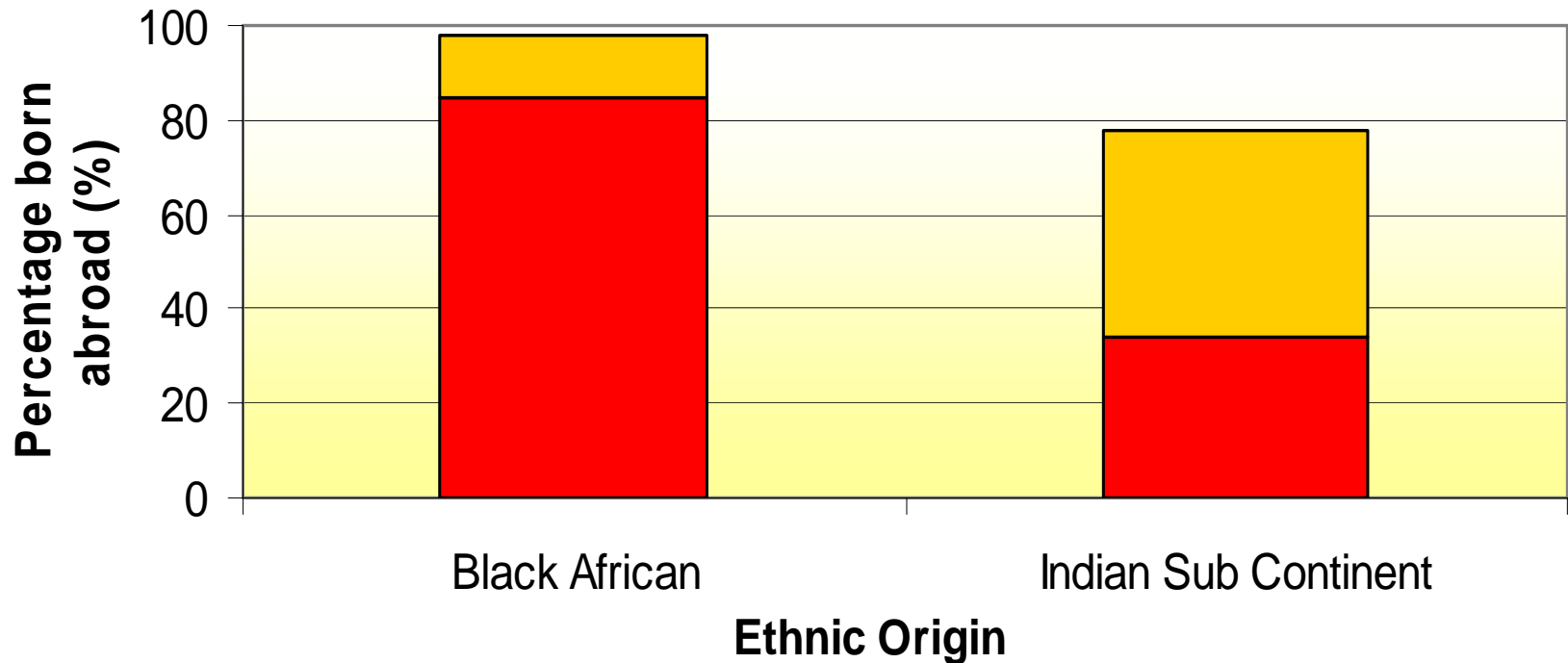


- Identify Trends
- Identify Risk Factors

Risk Factors



Proportion of Tuberculosis Patients Born Abroad by Time of Entry into the UK

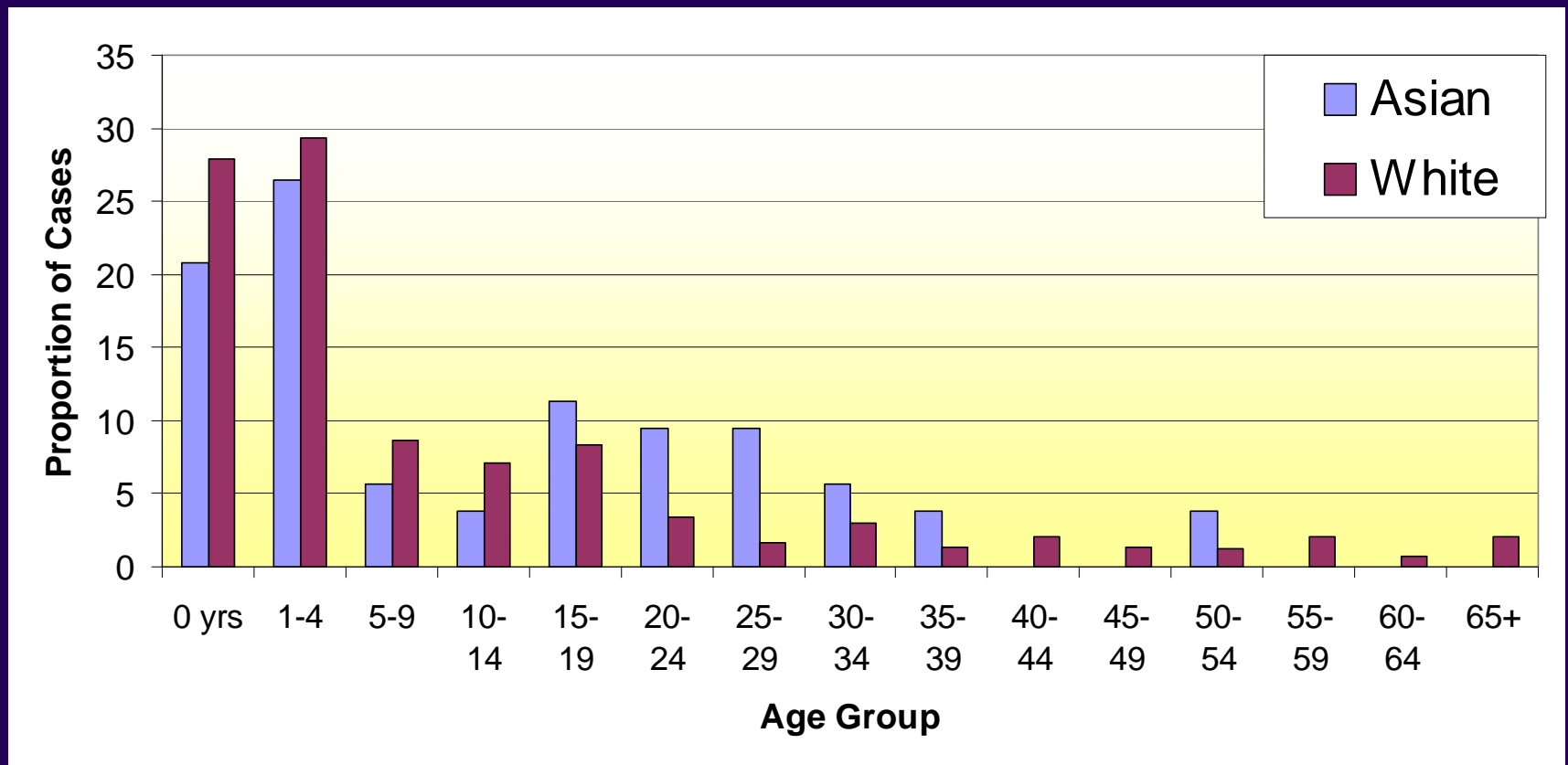


■ Entered UK in last 5 years ■ Time of entry into UK unknown or > 5 years

Risk Factors



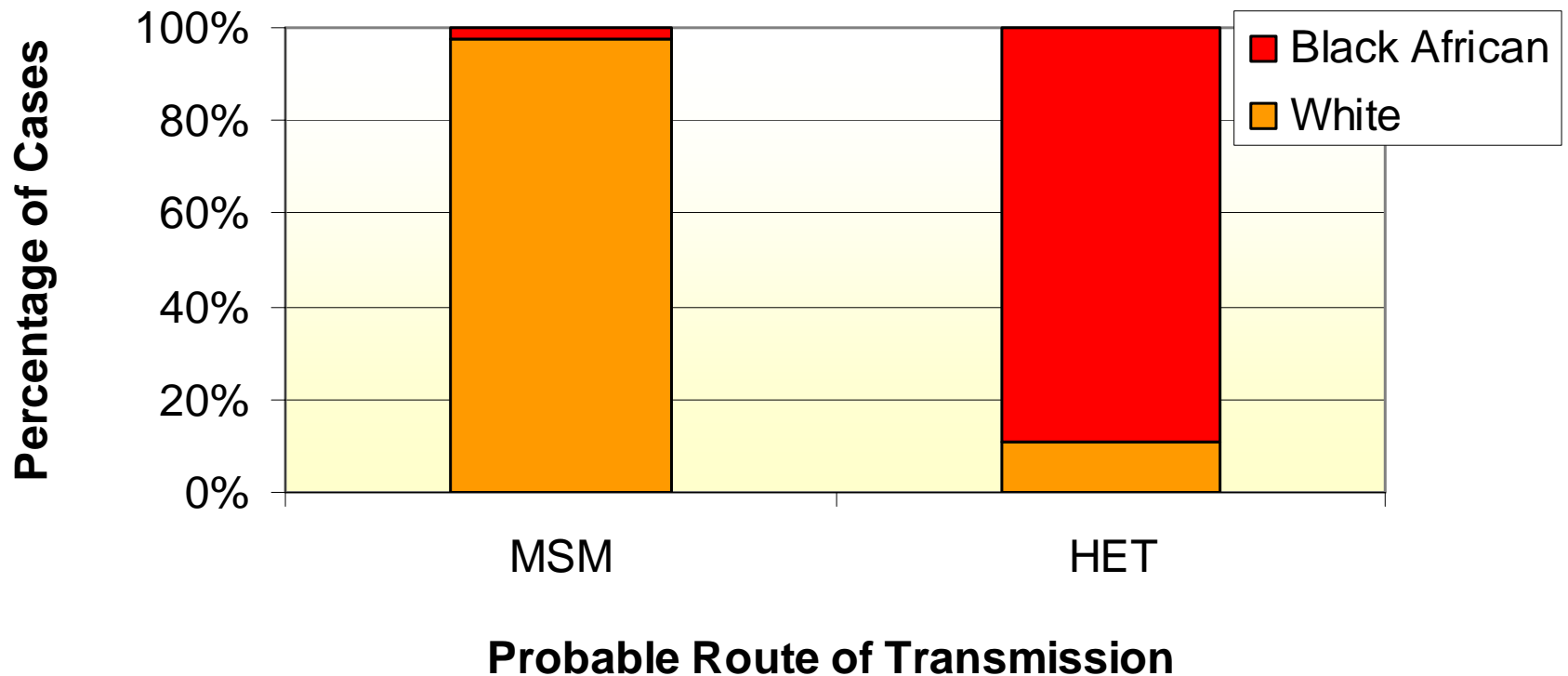
Meningococcal disease by ethnic origin and age group: West Midlands, 2000 to 2004



Risk Factors



New HIV Diagnoses in the West Midlands by Route of Transmission and Ethnic Group, 2004



Why analyse data by ethnicity?



- Identify Trends
- Risk Factors
- Targeted Interventions

Targeted Interventions

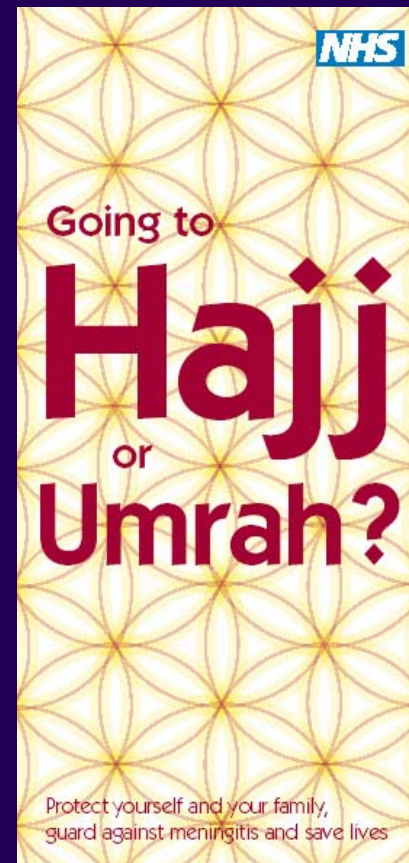


- **BCG Vaccine**

- Children whose parents or grandparents were born in a high incidence area and recent immigrants

- **Meningococcal Quadrivalent Vaccine**

- All visitors to Hajj or Umrah

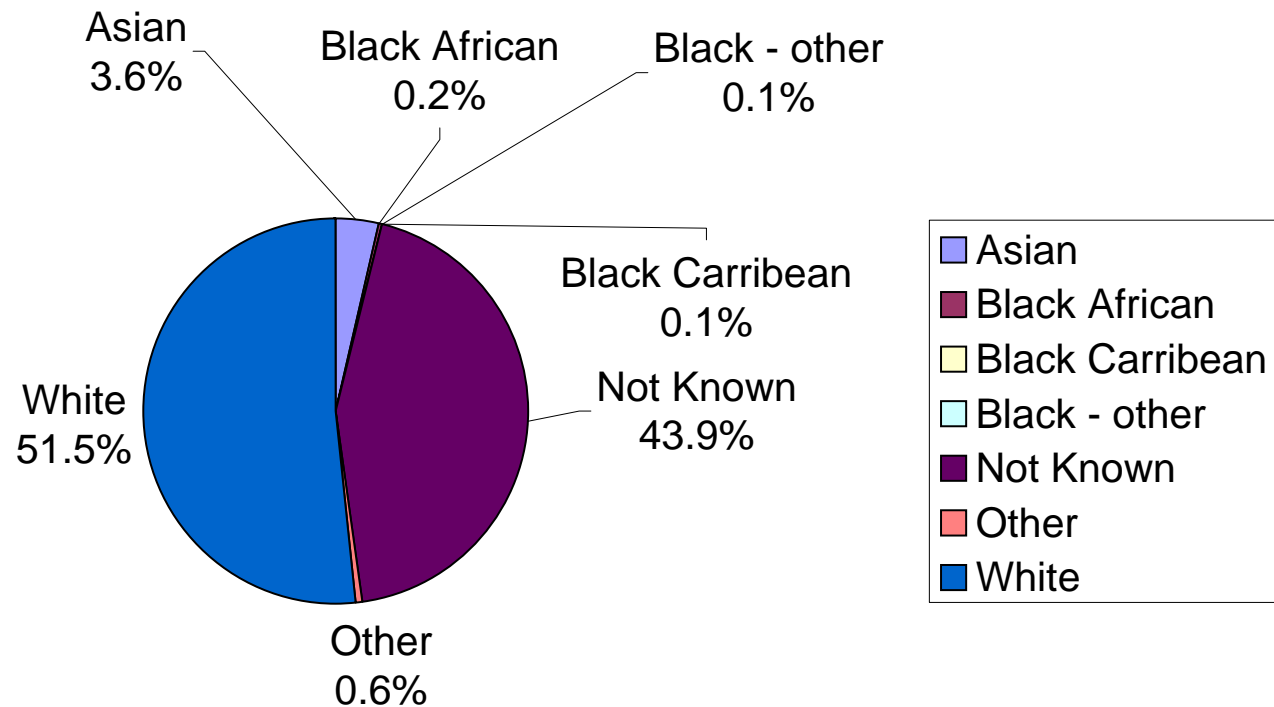


Problems with using ethnicity data



- Incomplete

Meningococcal disease by ethnicity: West Midlands, 2000 to 2005



Incomplete



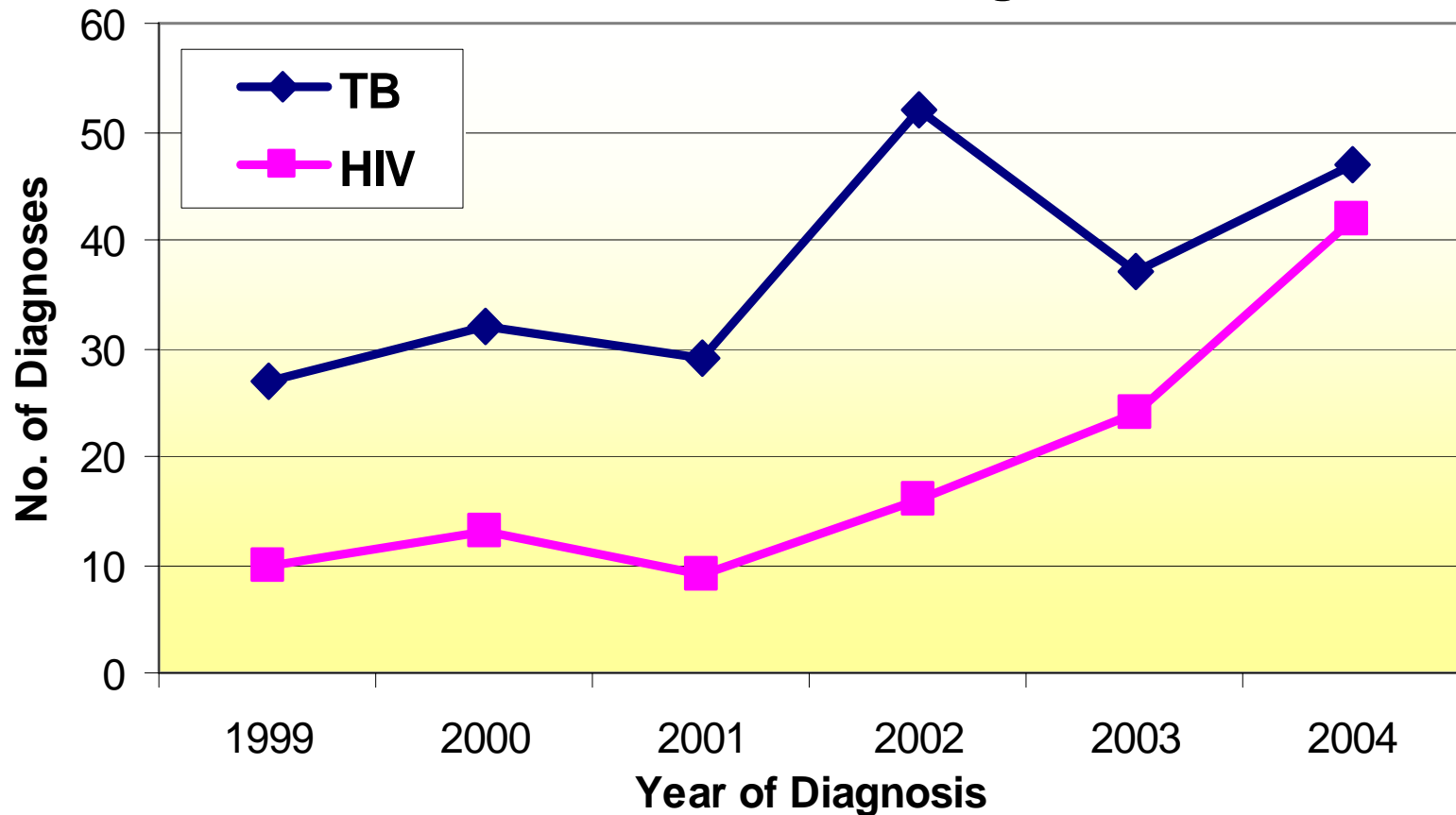
- TB > 99% Completion in 2005
- HIV 95% Completion in 2005

Problems with using ethnicity data



- Incomplete
- Coding

Diagnoses of TB and HIV in patients of mixed or other ethnic origin



Problems with using ethnicity data

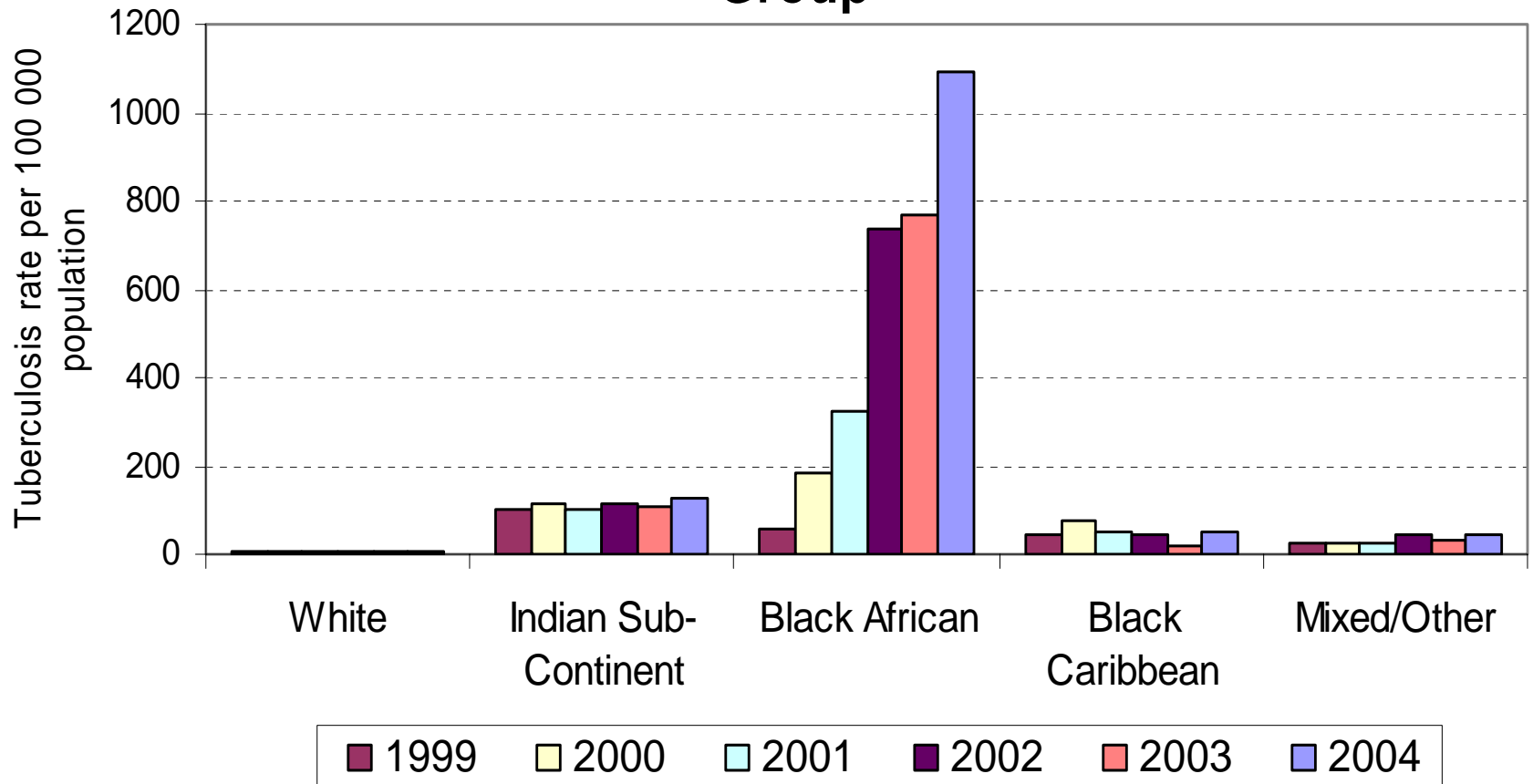


- Incomplete
- Coding
- Calculating rates

Calculating Rates



Rates of Tuberculosis in the West Midlands by Ethnic Group



Problems with using ethnicity data



- Incomplete
- Coding
- Calculating rates
- Reporting

- Political and Cultural Sensitivity
- Increasing rates of HIV and TB in patients born abroad could fuel anti-asylum sentiment
- Increase in HIV in Black African's is overshadowing the UK transmission of HIV in White MSM.

Conclusions



- Ethnicity is an important tool for identifying trends and risk factors in infectious disease epidemiology
- Aggregate data disguises ethnic inequalities
- Availability of ethnicity data is improving

Conclusions



- Ethnicity data can impact on policies and services
- Care must be taken when analysing and reporting data on ethnicity

Further data on infectious disease in the West Midlands are available at:

<http://www.hpa-wm.co.uk/>

Email **hilary.mossop@hpa.org.uk** for login details