

2019 NTM & Bronchiectasis Conference

NTM Epidemiology Around The World

Europe

Charles Haworth

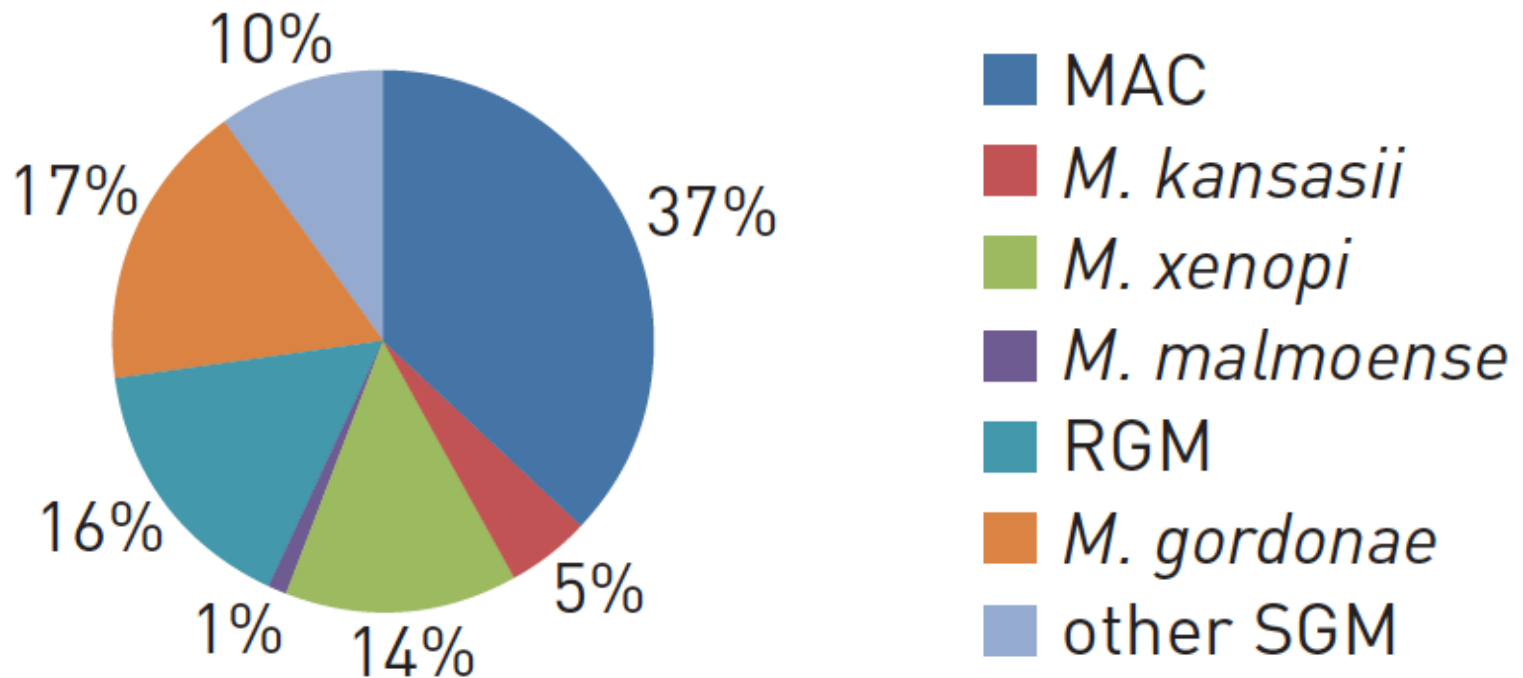


Royal Papworth Hospital
NHS Foundation Trust

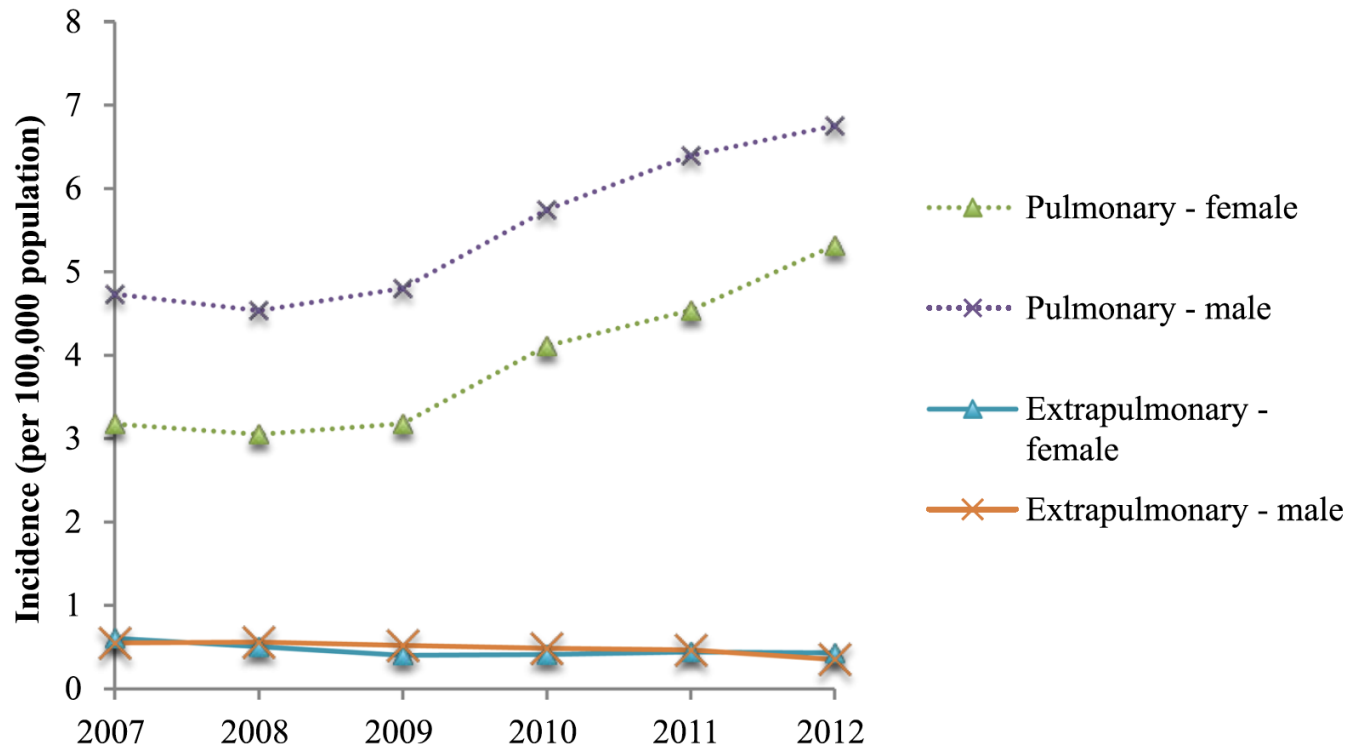


Cambridge Centre
for Lung Infection

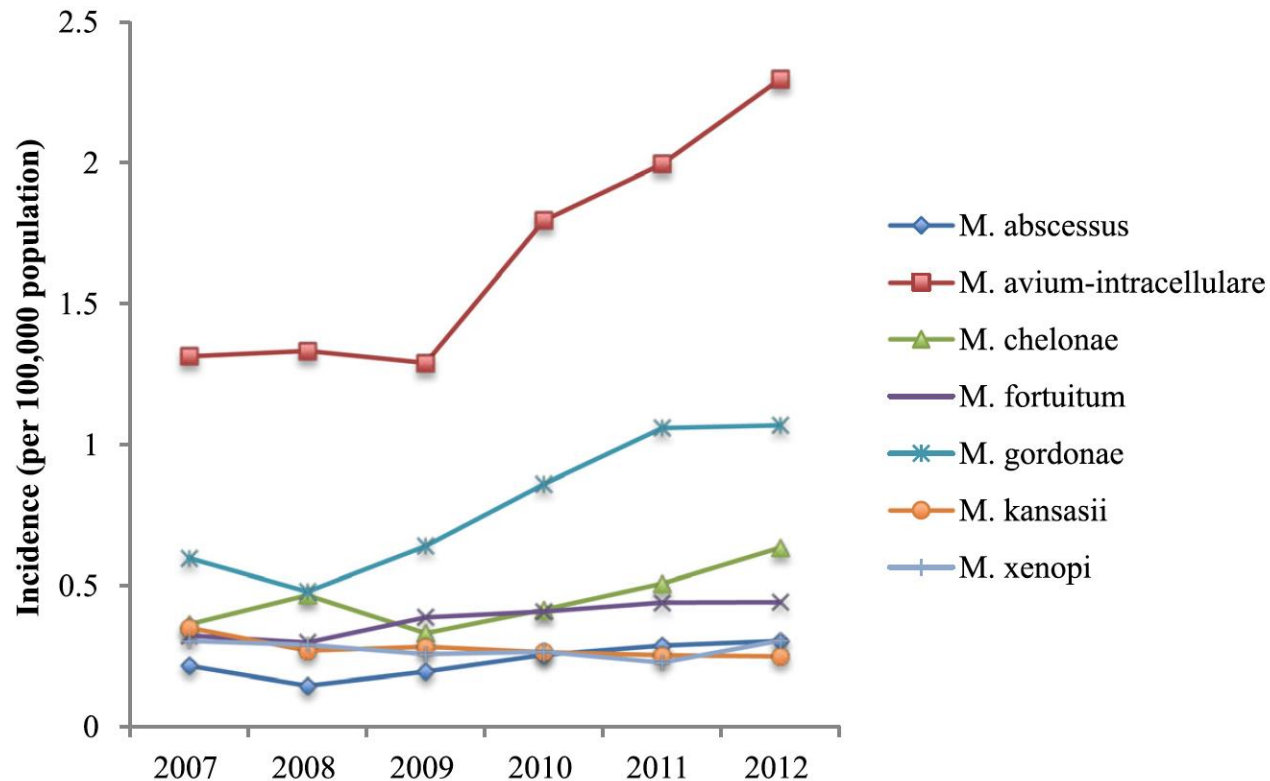
- **NTM isolated from pulmonary samples in 2008**
 - 43 laboratories, 6803 patients



- **Incidence of NTM isolation in England, Wales and Northern Ireland 2007 - 2012**



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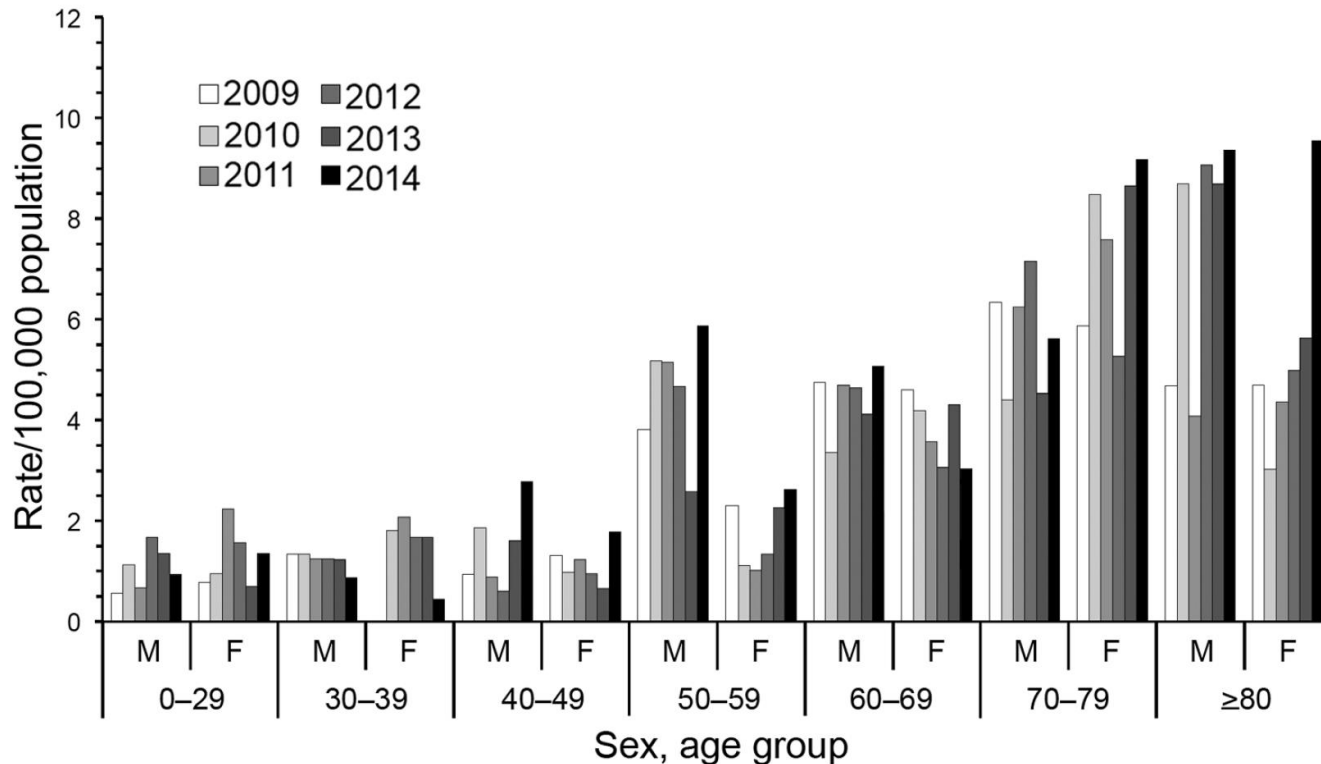


- **NTM incidence & prognostic factors in Denmark**
 - **Population based study of all adults in Denmark with at least 1 NTM positive pulmonary specimen between 1997 and 2008**
 - Mean annual rate of NTM-PD per 100,000 person years: 1.08 (stable over 12 years)
 - Five year mortality after NTM-PD: 40.1%
 - *M. xenopi* associated with a worse prognosis than MAC
 - Greater comorbidity, increased age and male sex were predictors of death

- **Risk of NTM-PD in Denmark**
 - **Population based case-control study of all adults in Denmark with NTM-PD between 1997 and 2008**
 - Chronic respiratory disease associated with 16.5 x increased risk of NTM-PD
 - Asthma (8 x), COPD (16 x), Bronchiectasis (188 x) and previous TB (178 x)
 - **Among people with COPD, the risk of NTM-PD was associated with the use, dose and type of inhaled corticosteroid**

- **NTM disease managed in UK primary care 2006 – 2016**
 - **Average annual prevalence of NTM disease was 6.38 per 100,000**
 - In those with respiratory disease, 27.7 per 100,000
 - **Major risk factors:**
 - Previous TB
 - Bronchiectasis
 - Lung cancer
 - Immunosuppressive medication
 - Oral corticosteroids

- **Prevalence of NTM-PD in Germany 2009 – 2014**
– **Increased from 2.3 to 3.3 per 100,000**



- **Burden of NTM-PD in Germany**

- 125 patients with newly diagnosed NTM-PD in 2010/11 were matched with 1250 controls and followed for 39 months

- Mortality 22% in people with NTM-PD vs 6% in controls
 - Hospitalisation 3 x higher in cases than controls
 - **Mean healthcare expenditure €39,559 (4 x higher than controls)**



EMBARC

The European Bronchiectasis Registry



The European NTM Registry



Registry study design

- Prospective observational study
 - Patient consent and enrolment as baseline
 - Follow-up at treatment initiation, 1 year, treatment stop
 - Enrolment in
 - UK
 - France
 - Spain
 - Portugal
 - Serbia
 - Greece
 - Netherlands
 - Belgium
- Germany now in set-up**

SGRQ and QOL-B questionnaire performed

**Completed at baseline
and follow-up**

**Countries must have a
validated translation in
local language to
participate**



www.bronchiectasis.eu

Started July 2018



EMBARC

The European Bronchiectasis Registry

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- Home
- About EMBARC ▾
- NEWS ▾
- RESEARCH ▾
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- Patient Resource
- Registry Documents
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Summary:
Completed Sections: 0
Incomplete Sections: 7

Not all sections are completed:
you cannot submit the case

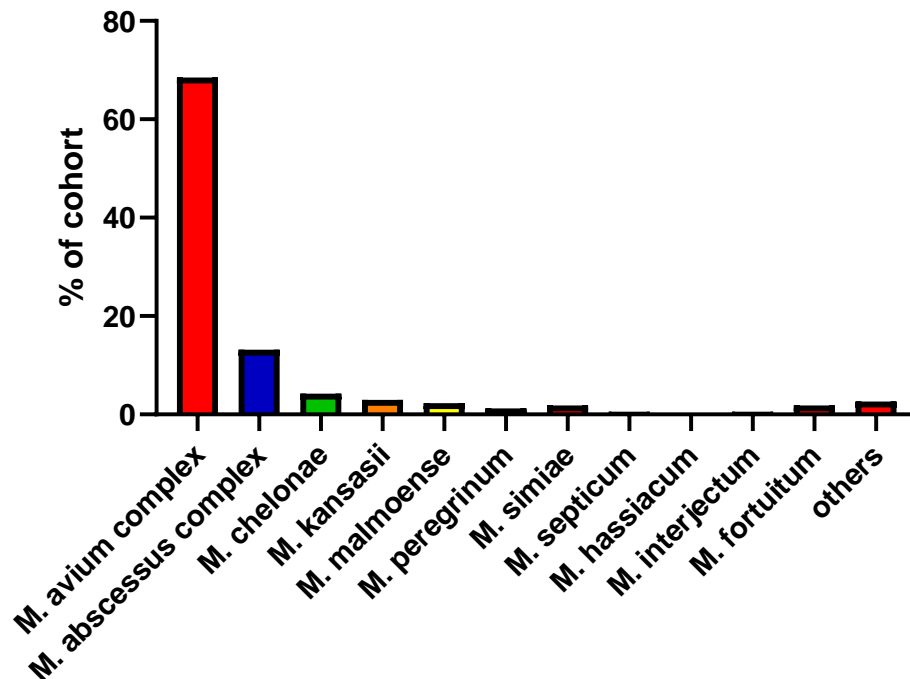
NTM Database CRF Case TBS 578

[Back to list](#)

- Basic Case Information Draft
- Co-morbidities Draft
- NTM Background Draft
- NTM Visit Data Draft
- Radiology Draft
- NTM Treatment Draft
- Microbiology Draft
- Additional Information

Data from EMBARC Bronchiectasis and NTM Registry

- **880 people meeting ATS/IDSA criteria for NTM-PD**
 - 69% *M. avium* complex
 - 13% *M. abscessus* complex
 - Others with >5 cases are shown



Demographics

71% female

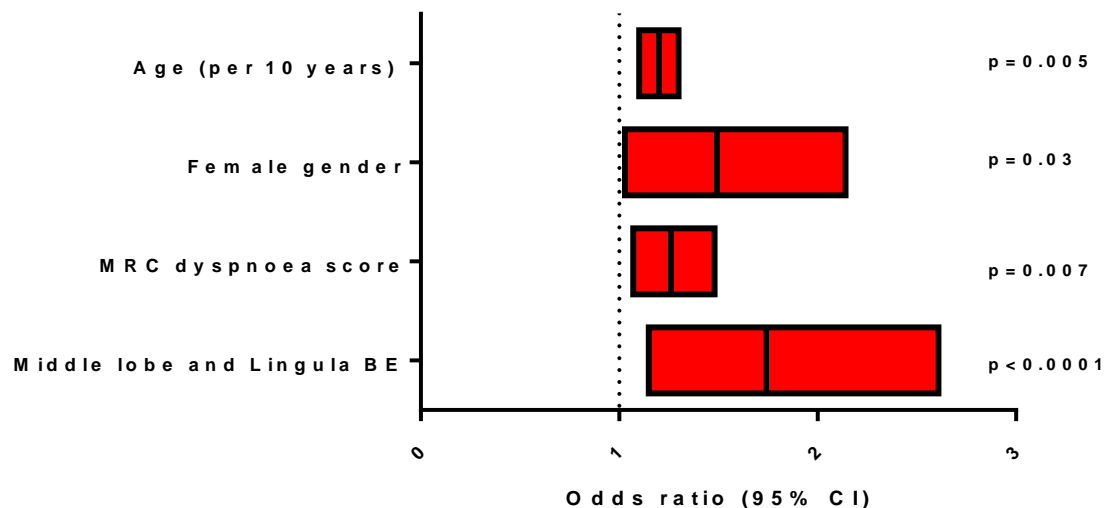
Average age= 65 years

66% never smoked

Data from EMBARC Bronchiectasis and NTM Registry

- **People with Bronchiectasis & NTM-PD**

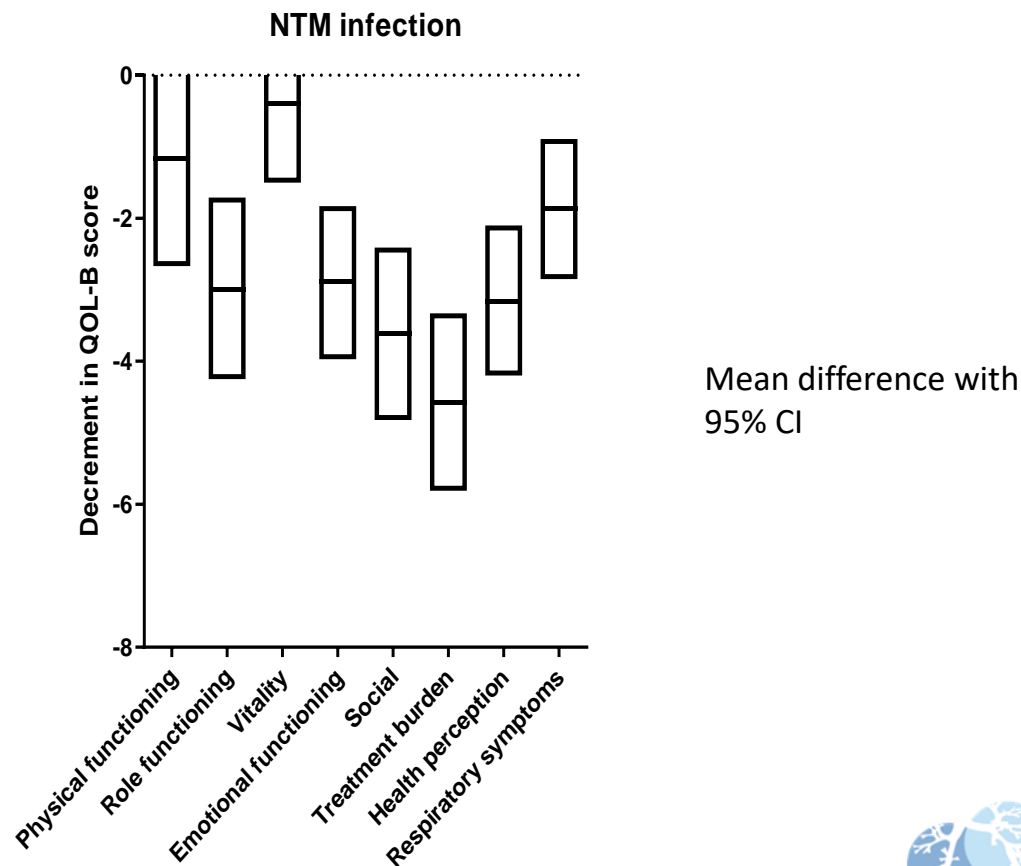
- Older (mean 67 vs 63 years, $p < 0.0001$)
- More likely to be female (71% vs 58%, $p < 0.0001$)
- Lower median BMI (22.7 vs 25.1, $p < 0.001$)
- More middle lobe & lingula bx (54% vs 40%, $p < 0.0001$)



**Independent
predictors of NTM**

Data from EMBARC Bronchiectasis and NTM Registry

- **NTM-PD is an independent risk factor for worse QoL**



*Analysis performed with N=512 patients

Data from EMBARC Bronchiectasis and NTM Registry

- **Risk factors for developing NTM-PD in bronchiectasis**
 - 4085 patients with bronchiectasis without NTM-PD at baseline (based on 2 or more negative cultures)
 - Followed for a total of 8327 years (approx 2 years per patient)

Data from EMBARC Bronchiectasis and NTM Registry

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 - **58 new ATS/IDSA defined cases of NTM-PD during follow up associated with:**
 - Older age (OR 1.04 95% CI 1.02-1.07, p=0.002)
 - Female sex (OR 1.87 95% CI 1.07-3.29, p=0.03)
 - Inhaled corticosteroids (OR 2.0 95% CI 1.22-3.30, p=0.006)
 - Low BMI (OR 0.93 95% CI 0.89-0.98, p= 0.003)
 - History of ABPA (OR 3.06 95% CI 1.01-9.24, p=0.04)

Severity of disease (radiological severity or multidimensional scoring systems) did not predict NTM-PD.

- **Summary**

- ***M. avium* complex is the most common cause of NTM-PD**
- Mean annual incidence rate of NTM-PD is ~ 1.08 per 100,000 person years
- Annual prevalence of NTM-PD is ~ 3-6/100,000 people and is likely increasing, particularly in the elderly
- **Approximately 5% of patients with bronchiectasis in the EMBARC registry also have NTM-PD**
 - Risk factors for developing NTM-PD include female sex, older age, low BMI, history of ABPA and use of inhaled corticosteroids



EMBARC

The European Bronchiectasis Registry

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- Home
- About EMBARC ▾
- NEWS ▾
- RESEARCH ▾
- EDUCATION ▾
- Patient Resource
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Summary for editor:
Submitted cases: 22882
Unsubmitted cases: 1373

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Embarc Database CRF

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Unsubmitted cases 

Show entries

Search:

Filter: [Case types: \[Standard, Exacerbation\]](#)

Case	Owner	
Case 008-0028	Terrassa (annienavarra@mutuaterrassa.com)	Remove
Case 000	vbatnaru (victor.botnaru@usmf.md)	Remove
Case 000000000	Barts (d.vaghela@nhs.net)	Remove
Case 00013	jdgracia (javier.gracia@vhir.org)	Remove
Case 00014	jdgracia (javier.gracia@vhir.org)	Remove
Case 001	eshenkulava (eshenkulava@mail.ru)	Remove