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Journal club

Service targeting hard to reach tuberculosis patients in London is cost effective

The incidence of tuberculosis in the UK is increasing, particularly in hard-to-reach groups such as problematic drug users and homeless individuals. A 'Find and Treat' service, which provides mobile radiography and case management support, has been operating in London since 2007. This study assessed the cost effectiveness of the Find and Treat service for diagnosing and managing hard to reach patients with tuberculosis.

Patients with active pulmonary tuberculosis screened or managed by the Find and Treat service between 2007 and 2010 (48 identified by mobile screening, 188 referred for case management support and 180 referred as lost to previous follow-up) were matched with 252 control patients who presented via London's enhanced tuberculosis surveillance system. A model was constructed based on various parameters such as the likelihood of completing treatment and quality of life with untreated and treated tuberculosis. The Find and Treat service was estimated to gain 220 quality-adjusted life years (QALYs) at a cost of £1.4 million/year, estimating the incremental cost effectiveness ratio of the service at £6400/QALY. Making less favourable assumptions in the model led to a higher cost per QALY, but the service was still cost effective using NICE's cut-off of £20 000–£30 000/QALY.

This study suggests that the London Find and Treat service is cost effective at identifying and treating hard-to-reach individuals with tuberculosis. Similar initiatives may be rolled out in other cities with a high prevalence of tuberculosis.

► **Jit M**, Stagg HR, Aldridge RW, *et al*. Dedicated outreach service for hard to reach patients with tuberculosis in London: observational study and economic evaluation. *BMJ* 2011;**343**:d5376.

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