



Health Update:

Increase in Tuberculosis (TB) Cases in San Francisco and New TB Prevention Law

March 28, 2025

On March 26, 2025, following [World TB Day](#), the San Francisco Department of Public Health (SFPDH) released the annual report of [Tuberculosis in the City & County of San Francisco, 2024](#) announcing that in 2024, the incidence of active tuberculosis (TB) disease increased 35% compared with 2023, and 58% since 2022.

This health update summarizes the increase in reported TB cases, SFPDH's recommendations for clinical providers and a new California law requiring the provision of TB risk assessment and preventive services in primary care settings.

Situational Update

On March 26, 2025, the SFPDH released the annual report [Tuberculosis in the City & County of San Francisco, 2024](#) announcing that 91 cases of active TB disease were reported for an annual incidence of 10.9/100,000 persons among San Francisco residents in 2024. This constitutes a 35% increase in TB incidence compared with 2023 (8.1/100,000), and 58% compared with 2022 (6.9/100,000 persons). This steady increase since 2022 is a concerning trend, although TB rates remain lower than prior to the COVID-19 pandemic. The full report can be accessed at [SF.gov/TB](#)

- The TB incidence among San Francisco residents increased to 10.9/100,000 persons, which is more than three times the national rate and twice the California rate.
- San Francisco residents who were non-U.S.-born had a significantly higher TB incidence (27.1 per 100,000) than U.S.-born residents (2.0 per 100,000).
- TB incidence was 17 times higher among Hispanic/Latino residents, nearly 20 times higher among Black residents, and over 30 times higher among Asian/Pacific Islander residents compared with Non-Hispanic White residents.
- Nearly half of people who had active TB in San Francisco were residents aged 65 or older and 11% died.



A new law, [California Health and Safety Code § 121560 \(2024\)](#), that took effect on January 1, 2025 requires that adult patients receiving primary care services should be offered TB screening, including TB risk assessment followed by TB tests if risk factors are identified and appropriate follow-up clinical care based on results. Adherence to this law allows for detection of latent TB infection (LTBI) which, when treated, reduces the chances for active TB disease to occur.

Actions requested of SF Clinicians:

Diagnose active TB disease by staying vigilant for symptoms of TB and X-ray findings consistent with TB in patients with epidemiologic risk factors.

Report cases of active TB disease to the SFDPH: Call (628) 206-3398 to make an initial report within 24 hours of diagnosis as required by [Title 17, California Code of Regulations \(CCR\)](#)

Prevent TB in your patients by screening and treating for LTBI:

- **Identify patients at risk** for TB: Risk factors include:
 - birth, travel, or residence in a country with an elevated TB rate
 - current or planned immunosuppression
 - current or prior homeless or incarceration
 - close contact to someone with infectious TB disease during the patient's lifetimeFor details, see: [California Adult TB Risk Assessment \(CDPH 2024\)](#)
- **Test** patients who are at risk for active or latent TB: TB blood tests are available and recommended for LTBI: [QuantiFERON-TB Gold Plus \(Quiagen\)](#) or [T-SPOT.TB \(Revvity\)](#). Skin testing is an alternative if a TB blood test is not feasible. [LTBI Risk Assessment Tools and Treatment Guidelines \(San Francisco DPH\)](#)
- **Evaluate** patients who test positive to further characterize their condition as either **latent** or **active** TB as follows: repeat a symptom screen, obtain a chest X-ray, and perform a physical exam to look for signs and symptoms of active TB disease. Sputum testing with PCR, smear and culture may be indicated depending on findings. [Clinical Testing and Diagnosis for Tuberculosis \(CDC\)](#)
- **Treat LTBI** to prevent active TB disease: Most persons with risk factors and a positive TB blood or skin test should be treated for LTBI after active TB disease has been excluded. [Treatment Regimens for LTBI \(CDC\)](#)

Additional resources:

Laboratory evaluation of sputa: <https://www.sf.gov/information--sputum-collection-primary-care-providers>



Referral criteria, forms, and instructions for San Francisco TB Clinic 628-206-8524 (phone) or 628-206-4565 (fax): <https://www.sf.gov/information--tuberculosis-clinic-referrals-criteria>

TB Reporting in San Francisco: <https://www.sf.gov/report-tb-san-francisco-department-public-health>

New! California Health & Safety Code § 121560 (2024): Information from California Department of Public Health: <https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/AB-2132.aspx>

Preventing TB Disease in 4 Steps: https://ctca.org/wp-content/uploads/LTBI_12-29-24.pdf

Latent Tuberculosis Infection: A Guide for Primary Health Care Providers (CDC 2020) <https://www.cdc.gov/tb/media/pdfs/Latent-TB-Infection-A-Guide-for-Primary-Health-Care-Providers.pdf>

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