### Additional file 2. Overview of the prevalence of TB in various samples of patients with AUD

<table>
<thead>
<tr>
<th>Author(s) / Year of Publication</th>
<th>Setting [Country(s) / Study Year(s)]</th>
<th>Study design and study population</th>
<th>Type of TB</th>
<th>% of pts with TB among AUD patients</th>
<th>Definition of AUD*</th>
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<tbody>
<tr>
<td>[120] Feingold 1976</td>
<td>Fulton County, Georgia, 1972</td>
<td>All new cases of active TB reported to the Fulton County Health Department in 1972</td>
<td>Active TB</td>
<td>49% of all new cases of TB occurred in alcoholics (81 out of 164) (gdu)</td>
<td>A pt was considered to be an alcoholic if his record met one of the following criteria: 1) A description by a physician, or social worker of chronic, high intake of alcohol with behaviour associated with alcohol abuse; 2) Repeated hospital emergency &amp; outpatient clinic visits during which drunkenness was observed; 3) Report of alcohol use coupled with the existence of organic, alcohol-associated disease (pancreatitis, cirrhosis, gastritis); &amp;/or 4) Diagnosis of alcoholism on a discharge summary from the Hospital.</td>
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<td>[151] Friedman et al. 1987</td>
<td>New York City alcoholic &amp; drug abusing welfare population, New York City, New York, USA, 1984</td>
<td>2,641 welfare clients. 400 alcohol-only abusers; 342 drug abusers-only; 246 alcohol/drug abusers (total 970) (gdu)</td>
<td>Pulmonary TB</td>
<td>Out of 970 alcohol &amp; drug abusers, 400 abuse alcohol-only - 39.8% with a positive tuberculin skin test (TBST+) - status &amp; no evidence of disease &amp; 18.3% with confirmed TB; alcohol &amp; drug abuse - 33.3% with TBST+ - status &amp; no evidence of disease &amp; 13% with confirmed TB (gdu)</td>
<td>Alcoholism: average daily consumption of 1.92 or more ounces (58mL) of ethyl alcohol (e.g. 1 pint of wine, 4 cans of beer, or 3 mixed drinks) for at least 1 month, or inebriation on examination</td>
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<td>[152] Friedman et al. 1996</td>
<td>New York City, New York, USA, 1984-1992</td>
<td>Cohort of 858 (M=82%) subjects in very-high-risk group who abuse drugs, alcohol or both was followed for 8 yrs.</td>
<td>Active TB</td>
<td>TB developed in 47 (5.5%). 3.5% (12 out of n=347) of TB among alcohol-only abusers; 6.3% (14 out of n=222 subjects) among alcohol &amp; drug abusers (gdu)</td>
<td>Alcoholism: average daily consumption of 2 ounces (59 mL) of ethyl alcohol (e.g. 1 pint of wine, 4 cans of beer, or 3 mixed drinks) for at least 1 month, or inebriation on examination</td>
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<td>[153] Jones et al. 1954</td>
<td>Salvation Army Men’s Social Service Center in Minneapolis, Minnesota, USA, 1952-1953</td>
<td>405 of homeless M (70% alcohol abusers)</td>
<td>Active TB</td>
<td>The rate of active new cases of TB per 1,000 was 22.2 or 55.5 times as great as the rate of TB among the general Minneapolis population 0.4 per 1,000 in 1952.</td>
<td>Not defined</td>
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<td>[154] Olin &amp; Grzybowski 1986</td>
<td>Don Jail, Toronto, Ontario, Canada, 1986</td>
<td>For the 227 chronic drunkenness offenders chest X-ray, history of TB &amp; previous treatment in sanatorium were taken (gdu).</td>
<td>Previous or active pulmonary TB</td>
<td>Of 227 chronic alcoholics studied in jail, 20 (9%) had a previous diagnosis of TB. Significant findings compatible with TB were noted in 34 of 202 (17%) chronic alcoholics &amp; in two of 187 (1%) other offenders. Tuberculin testing of 98 inmates revealed that 81% of the chronic alcoholics &amp; 33% of the other offenders had positive skin tests (gdu).</td>
<td>Not defined</td>
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<td>(Shevchenko 2001)</td>
<td>Gomel, Belarus, 1984-1985</td>
<td>160 (M:93%) chronic alcoholics with TB were randomly selected &amp; compared with TB pts without alcoholism (n is unknown)</td>
<td>Pulmonary TB</td>
<td>1998-1999: Incidence of TB among alcoholics was 114.3 as compared to the TB pts without alcoholism 50.6 per 100,000, ( p &lt; 0.01 ). Prevalence of TB among alcoholics was 820.1 as compared to the TB pts without alcoholism 174.6 per 100,000, ( p &lt; 0.01 ). Recurrence of TB among alcoholics was 25.5 as compared to the TB pts without alcoholism 4.4 per 100,000, ( p &lt; 0.01 ). Mortality due to TB among alcoholics was 50.9 as compared to the TB pts without alcoholism 5.3 per 100,000, ( p &lt; 0.01 ) (gdu)</td>
<td>Not defined</td>
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*All terms related to “alcohol use/users” are kept as in the original article

gdu - gender distribution is unknown

M – men; W – women

Pt(s) – patient(s)