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7th October 2025

Deputy Tony McCormack

Dáil Éireann

Leinster House

Kildare Street

Dublin 2

Re: PQ ref 53194/25 – Tuberculosis (TB) Service at St James's Hospital

Dear Deputy McCormack,

St James's Hospital is the national centre for TB care in Ireland, responsible for all the complex and drug-resistant TB cases, including all multidrug-resistant TB (MDR-TB), nationally. Since the closure of Peamount Hospital in 2005, St James's Hospital has continued to deliver this essential service without dedicated funding, and has submitted business cases to the Department of Health advocating for same.

Key facts:

- **Rising Incidence:** TB incidence in Ireland increased by 30% in 2024, with a fourfold rise in MDR-TB cases and a significant increase in paediatric TB.
- **Capacity Overstretched:** The service is operating at maximum capacity. The number of emergency reviews doubled from 2023 to 2024. These reviews are used to prevent hospital admissions and to start treatment urgently thus preventing onward transmission. This is unfunded and ad hoc. To manage active cases and to provide treatment for latent TB, the hospital has opened a second clinic per week as an emergency measure.
- **Impact on Children:** Paediatric TB cases have increased annually since 2017. The age-specific incidence rate (ASIR) for children rose from 0.8 in 2023 to 1.3 in 2024. Alarming, TB cases in children under one year in 2024 equalled the total cases from the previous 10 years combined.

- **Diagnostic Bottlenecks:** The Irish Mycobacterial Reference Laboratory (IMRL) at St James's Hospital, which supports TB diagnosis nationally, is also at full capacity and unable to meet the growing demand for rapid diagnostics, especially for drug-resistant TB.
- **Missed Targets:** Ireland is not on track to meet WHO End TB Strategy targets, and current resourcing falls short of national guidelines requiring immediate assessment of suspected TB cases.

Delays in diagnosis and treatment increase the risk of community transmission, drug resistance, and outbreaks—including in vulnerable settings such as prisons and among migrant populations. In addition, the financial burden of failing to meet WHO targets could exceed €70 million, with the cost of treating a single MDR-TB case estimated at €68,000.

Immediate investment is required to expand outpatient and laboratory capacity, recruit additional clinical staff, and support the IMRL. Without urgent action, the TB service at the hospital cannot meet current or future demand, putting public health at significant risk and undermining Ireland's commitments under the national and WHO TB strategies.

Yours sincerely,

Ms Aisling Collins

Chief Operations Officer