

## **QIAGEN's QuantiFERON-TB Gold Plus shows cost-effectiveness compared with TST in a newly published study in people with HIV**

- **Peer-reviewed health-economic analysis evaluates tuberculosis infection (TBI) screening strategies among people living with HIV in Thailand**
- **QuantiFERON-TB Gold Plus reduced the modeled lifetime risk of progression to active TB among individuals with TBI by approximately 41% compared with Tuberculin Skin Test (TST)**
- **Referenced during a symposium session at APRC 2026 on optimizing tuberculosis infection testing in high-risk populations**

**Bangkok, Thailand, February 09, 2026** - QIAGEN welcomes the publication of a peer-reviewed study, titled "*Optimizing tuberculosis infection screening strategies for people living with HIV in Thailand: a cost-effectiveness analysis*" (1). The study was conducted to support evidence-based decision making in Thailand and to help policymakers in low and middle income countries evaluate screening options for detecting tuberculosis (TB) infection.

The analysis modeled one-time TBI screening in adults living with HIV and projected lifetime costs and health outcomes based on Thai epidemiological and cost data. According to the published findings, Interferon-gamma releasing assays (IGRAs) such as QuantiFERON-TB Gold Plus (QFT-Plus) were associated with a lower modeled lifetime risk of progression to active TB, approximately 41% lower than TST, while also demonstrating lower projected lifetime costs per individual screened, despite higher initial test costs. Lower downstream expenditures for treatment, follow-up, adverse event management, diagnostic confirmation and active TB case management contributed to the overall cost difference. The study further noted that higher false-positive rates associated with TST in BCG-vaccinated populations were a key driver of unnecessary preventive treatment and increased healthcare resource utilization.

The findings were highlighted at the 10th Asia Pacific Region Conference of the International Union Against Tuberculosis and Lung Disease (APRC 2026) during a symposium session that discusses the topic about optimizing tuberculosis infection testing in high-risk populations.

"The study provides important evidence to inform national screening guideline discussions and resource allocation in high-burden settings," said Dr. Justin Chai, Director of Medical Affairs at QIAGEN. "The results highlight the potential value of more economically efficient screening approaches in supporting TB prevention among people living with HIV. At the same time, operational considerations such as infrastructure, workforce training and logistics remain critical, and further prospective cohort studies will be important to better understand real-world feasibility."

TB remains to be a serious global health problem (2). In 2022, there were 10.6 million new cases, 1.3 million deaths, and a quarter of the global population unknowingly were infected with tuberculosis. TB infection represents the reservoir for future active TB cases, contributing significantly to ongoing transmission within communities (3). Addressing this reservoir is crucial in reducing the burden of active TB and achieving global TB elimination goals.

QuantiFERON-TB Gold Plus is the world's leading IGRAs blood test, with millions of tests performed annually. It has established itself as a superior alternative to the dated TB skin test (TST), which is less effective in identifying TB infection in people who have received BCG vaccination, which is common for

patients from high-TB-burden countries, and in patients who may be unlikely to return for TST interpretation. QuantiFERON-TB Gold Plus has helped patients and providers globally by reducing the number of visits to a single blood draw with a faster turnaround time.

QuantiFERON-TB Gold Plus sets itself apart from other IGRA tests with a streamlined workflow and the use of whole blood samples, not purified lymphocytes. International guidance from the CDC and the WHO support the use of blood tests like QuantiFERON-TB Gold Plus in all settings as part of the fight to end the global TB epidemic.

#### References:

1. Sa-ngamuang C., Suwanpimolkul G., et al. *Optimizing tuberculosis infection screening strategies for people living with HIV in Thailand: a cost-effectiveness analysis*. **BMC Public Health**, 2025. Available at: <https://link.springer.com/article/10.1186/s12889-025-25491-1>
2. World Health Organization. Global tuberculosis report 2023. <https://www.who.int/teams/global-tuberculosis-programme/tb-reports/global-tuberculosis-report-2023>. Accessed 5 Oct 2024.
3. Rao M, Ippolito G, Mfinanga S, Ntoumi F, Yeboah-Manu D, Vilaplana C, Zumla A, Maeurer M, Latent TB. Infection (LTBI) - Mycobacterium tuberculosis pathogenesis and the dynamics of the granuloma battleground. *Int J Infect Dis*. 2019;80S:S58–61.

### About QIAGEN

QIAGEN N.V., a Netherlands-based holding company, is a global leader in Sample to Insight solutions that enable customers to extract and analyze molecular information from biological samples containing the building blocks of life. Our Sample technologies isolate and process DNA, RNA and proteins from blood, tissue and other materials. Assay technologies prepare these biomolecules for analysis, while bioinformatics support the interpretation of complex data to deliver actionable insights. Automation solutions integrate these steps into streamlined, cost-effective workflows. QIAGEN serves more than 500,000 customers worldwide in the Life Sciences (academia, pharmaceutical R&D and industrial applications such as forensics) and Molecular Diagnostics (clinical healthcare). As of December 31, 2025, QIAGEN employed approximately 5,700 people across more than 35 locations. For more information, visit <http://www.qiagen.com>.

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