

## EPIDEMIOLOGICAL SUMMARY

# Tuberculosis in Ontario: October 1, 2020 to September 30, 2025

Published: January 2026

## Introduction

This report, to be published on a quarterly basis, provides an epidemiologic summary of tuberculosis (TB) disease and TB infection (TBI), formerly referred to as latent TB infection, in Ontario and includes information available from Ontario's integrated Public Health Information System (iPHIS) as of **January 5, 2026**.

The current provincial case definitions for TB disease and TBI can be found in [Appendix 1 of the Infectious Disease Protocol for Tuberculosis](#).<sup>1</sup>

For further information regarding TB, including signs, symptoms, and how to reduce the risk of infection, visit Public Health Ontario's (PHO) [Tuberculosis \(TB\) webpage](#).<sup>2</sup>

## Key Messages

- Following a decline in TB incidence in Q4 of 2024 from a four-year peak of 1.7 cases per 100,000 population during Q2 and Q3 of the same year, TB rates have increased steadily throughout the first three quarters of 2025 but remain below peak levels.
- The elevated provincial rate of confirmed TB disease cases underscores the ongoing need for effective TB prevention and care as well as ongoing local and provincial surveillance to further understand the factors that may be contributing to these recent increases.
- The COVID-19 pandemic coincided with a sharp decline in the number of provincial notifications of TBIs. The number of TBIs reported in Ontario has since increased to pre-pandemic levels. Increases in the identification and diagnosis of TBI represents additional opportunities for preventive treatment of TBI to avert future TB disease cases, an important step to meeting reduction targets for TB disease cases. Addressing TBI is a key component of the WHO's [Framework Towards TB Elimination in Low Incidence Countries](#).<sup>3</sup>

# Highlights

## TB Disease

- Between October 1, 2020 and September 30, 2025, the quarterly incidence of TB disease ranged from a low of 1.1 cases per 100,000 population to a high of 1.7 cases per 100,000 population. ([Figure 1](#))
- Rates of TB disease have been generally higher in males compared to females, with the quarterly incidence ranging between 1.1 to 2.0 cases per 100,000 population for males and between 0.9 to 1.5 cases per 100,000 population for females. ([Figure 2](#))
- Overall, adults 80 years of age and older had the highest rates of TB (range: 1.5 to 4.2 cases per 100,000 population), followed by those 20-39 years of age (range: 1.3 to 2.4 cases per 100,000 population) and those 60-79 years of age (range: 1.1 to 2.0 cases per 100,000 population). ([Figure 3](#))
- Between October 1, 2024 and September 30, 2025 (i.e., the last 12 months), Northeastern Public Health had the highest rate of TB at 15.8 cases per 100,000 population, followed by Peel Public Health, Toronto Public Health, and Ottawa Public Health at 10.3, 9.7, and 8.3 cases per 100,000 population, respectively. ([Figure 4](#))
- Over the last five years (October 1, 2020 to September 30, 2025), the Toronto region has usually had the highest quarterly rate of TB disease (range: 2.0 to 3.4 cases per 100,000 population). ([Figure 5](#))

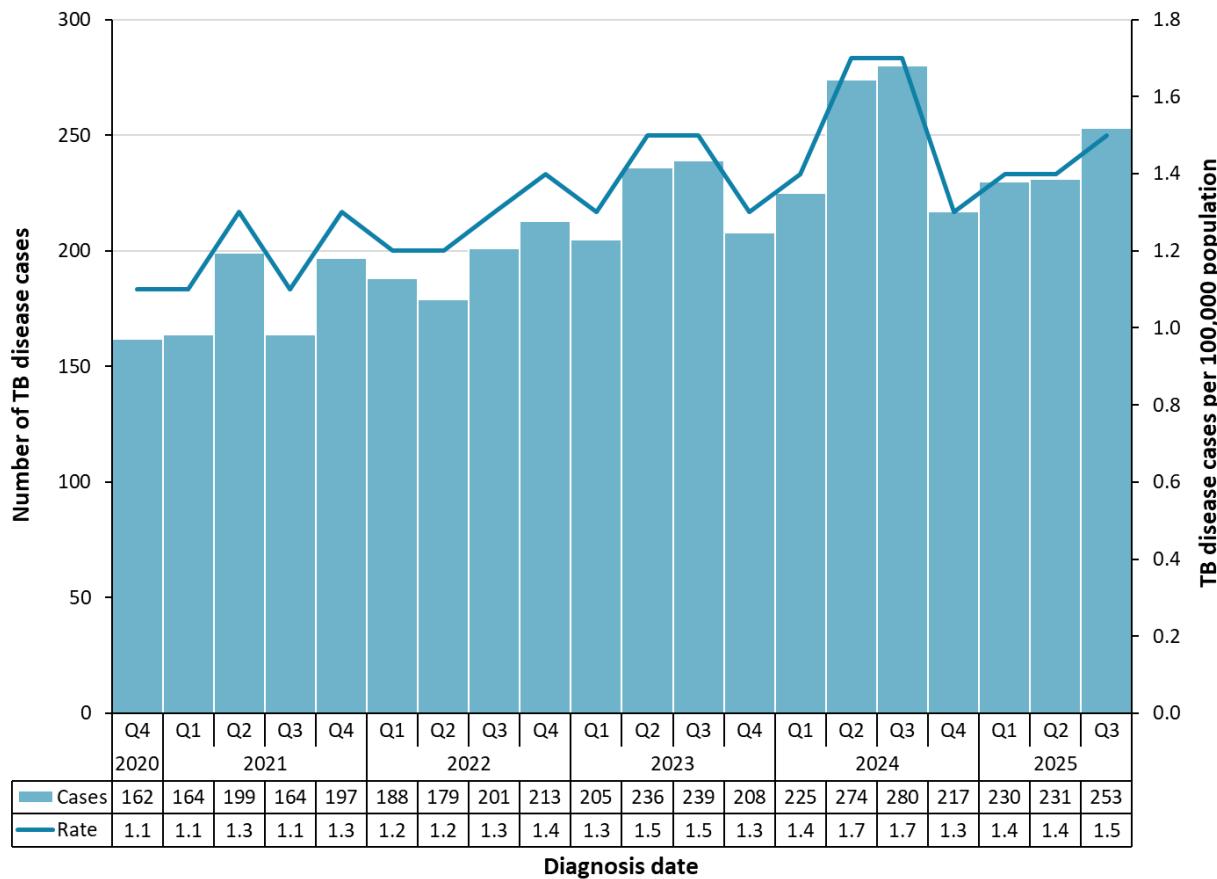
## TB Infection

- Following declines in notifications during the COVID-19 pandemic, TBI rates have gradually increased, reaching an average quarterly rate of 14.1 infections per 100,000 population in the last 12 months. ([Figure 6](#))
- Rates of TBI have been consistently higher in females compared to males. Since October 1, 2020 (i.e., following the sharp decrease observed at the start of the COVID-19 pandemic), the quarterly TBI incidence has ranged from 7.8 to 18.5 infections per 100,000 population for females and between 4.4 to 11.6 infections per 100,000 population for males. ([Figure 7](#))
- Overall, those aged 20-39 years had the highest rates of TBI which, since October 1, 2020, have ranged between 11.8 to 31.0 infections per 100,000 population. ([Figure 8](#))
- Between October 1, 2024 and September 30, 2025 (i.e., the last 12 months), Public Health Sudbury and Districts and Chatham-Kent Public Health had the highest rates of TBI at 127.9 and 120.1 infections per 100,000 population, respectively. ([Figure 9](#))
- Since October 1, 2020, the quarterly incidence rates of TBI have fluctuated widely across the regions, with the Eastern and North East regions reporting the highest rates, averaging 14.6 and 14.4 infections per 100,000 population, respectively. ([Figure 10](#))

# TB Disease

## Quarterly Trends

**Figure 1: TB Disease Cases and Rates Per 100,000 Population by Diagnosis Date: October 1, 2020 to September 30, 2025**

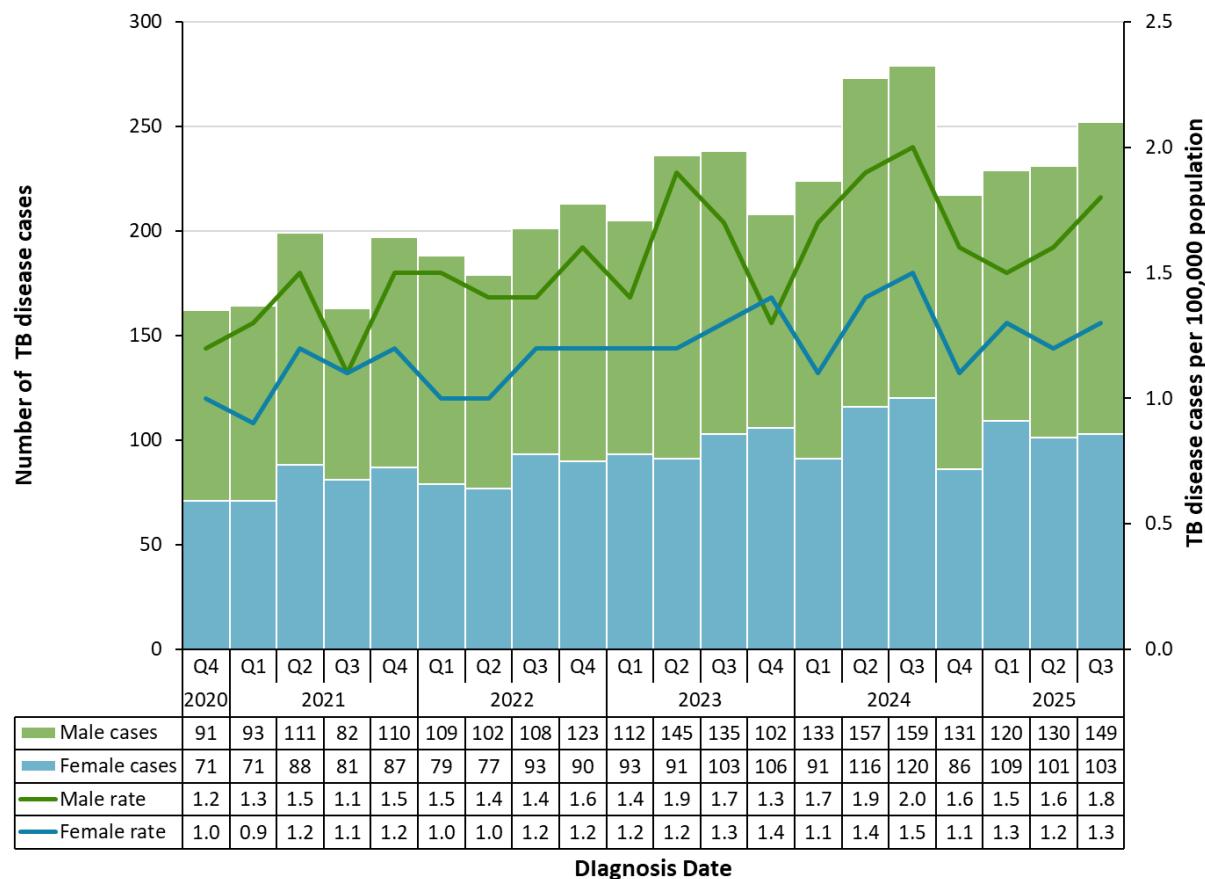


Data sources: Cases: Integrated Public Health Information System (iPHIS). Population denominators: Ontario Ministry of Finance.<sup>4</sup>

Note: Q1=January 1-March 31; Q2=April 1-June 30; Q3=July 1-September 30; Q4=October 1-December 31

## Sex and Age Group

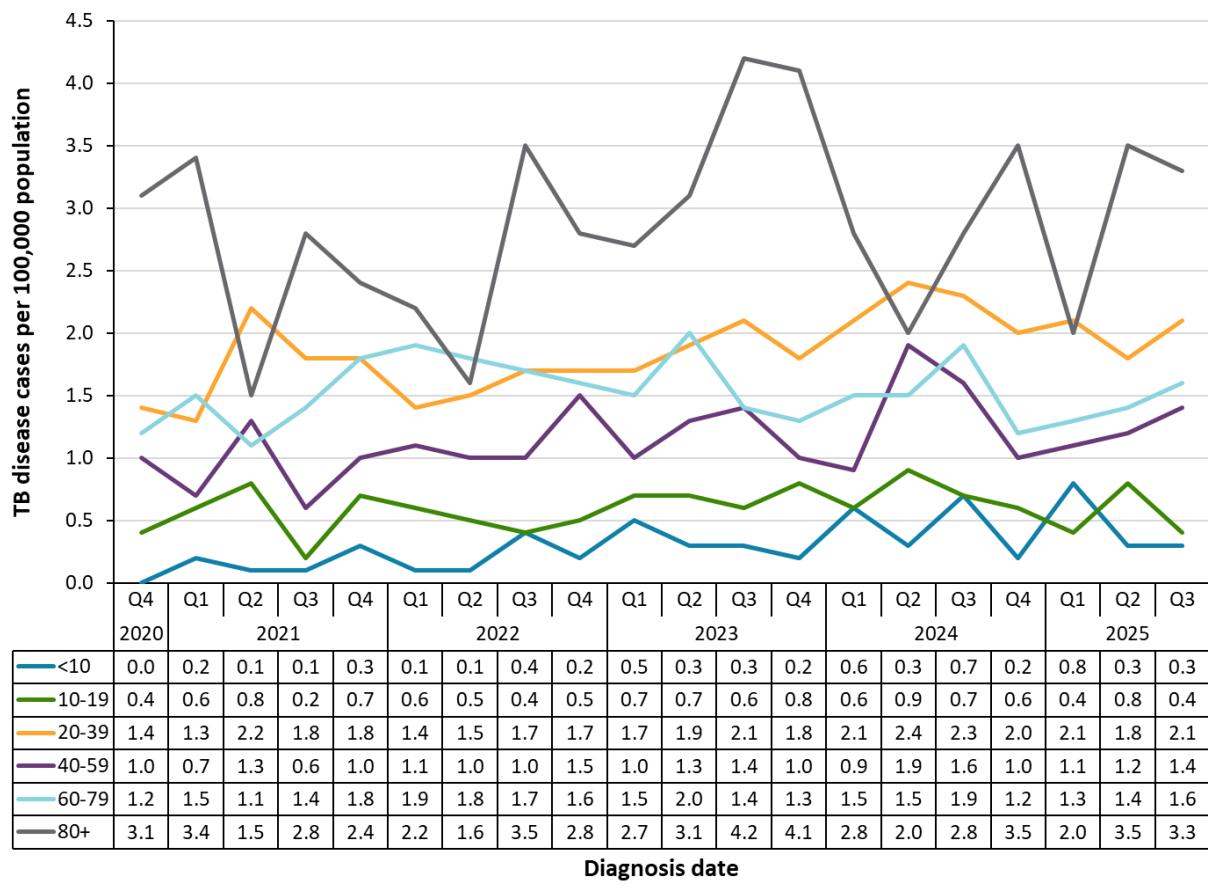
**Figure 2: TB Disease Cases and Rates Per 100,000 Population by Sex and Diagnosis Date: October 1, 2020 to September 30, 2025**



Data sources: Cases: Integrated Public Health Information System (iPHIS) Population denominators: Ontario Ministry of Finance.<sup>4</sup>

Notes: Q1=January 1-March 31; Q2=April 1-June 30; Q3=July 1-September 30; Q4=October 1-December 31. Excludes TB disease cases that did not identify as male or female.

**Figure 3: TB Disease Rates Per 100,000 Population by Age Group (years) and Diagnosis Date: October 1, 2020 to September 30, 2025**

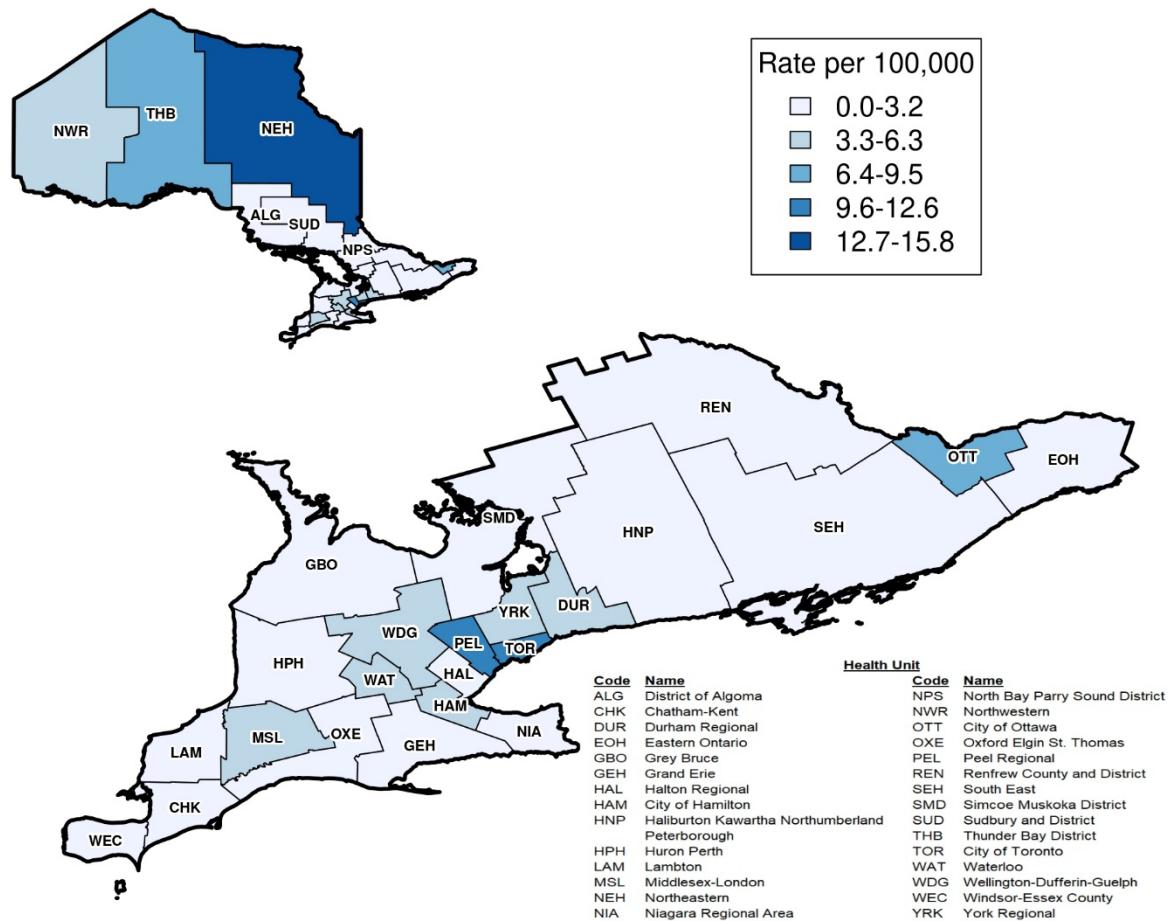


Data sources: Cases: Integrated Public Health Information System (iPHIS) Population denominators: Ontario Ministry of Finance.<sup>4</sup>

Note: Q1=January 1-March 31; Q2=April 1-June 30; Q3=July 1-September 30; Q4=October 1-December 31. Unknown ages were excluded from analyses.

## Geography

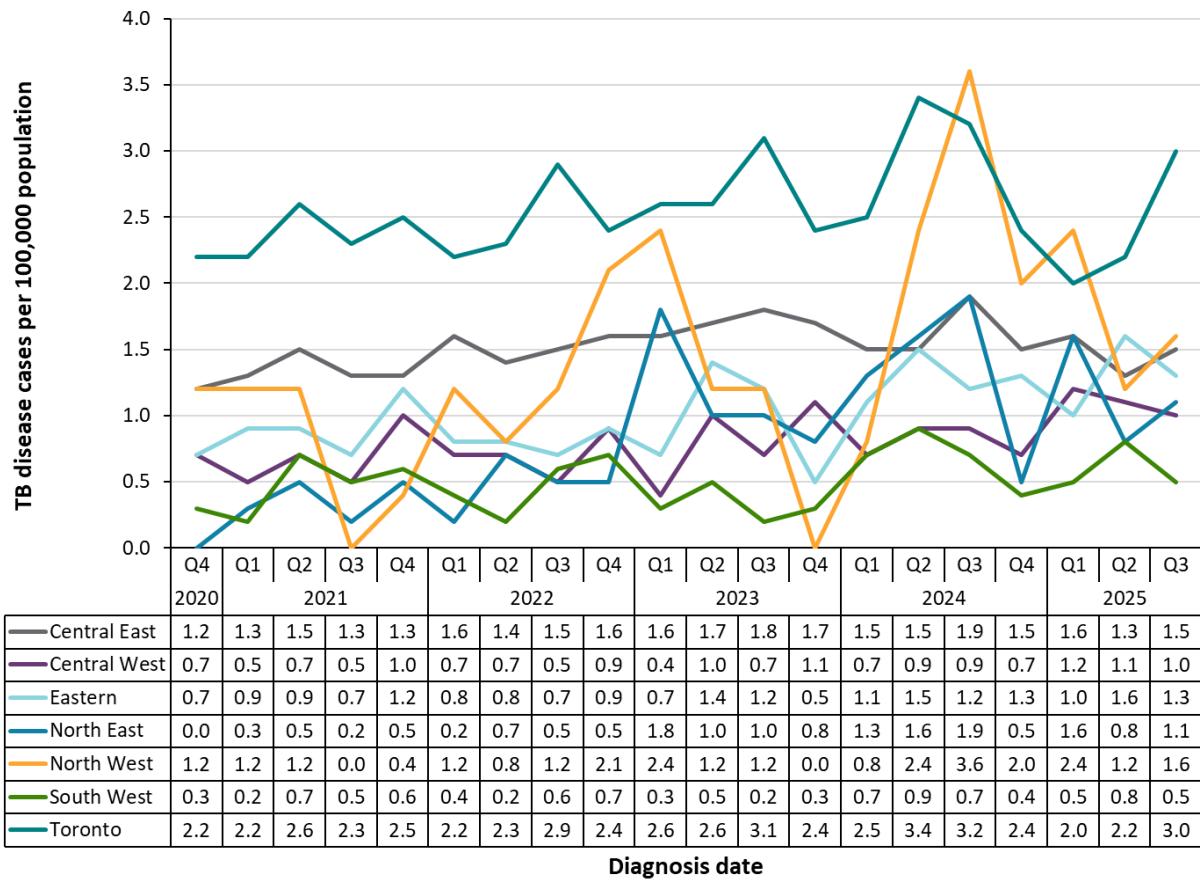
**Figure 4: TB Disease Rates Per 100,000 Population by Public Health Unit: October 1, 2024 to September 30, 2025 (i.e., last 12 months)**



Data sources: Cases: Integrated Public Health Information System (iPHIS). Population denominators: Ontario. Ministry of Finance.<sup>4</sup>

Note: See [Appendix A](#) for the full list of public health unit names and their 3-letter abbreviations, as well as annual rates by PHU for the years 2020-2025.

**Figure 5: TB Disease Rates Per 100,000 Population by Provincial Region: October 1, 2020 to September 30, 2025**



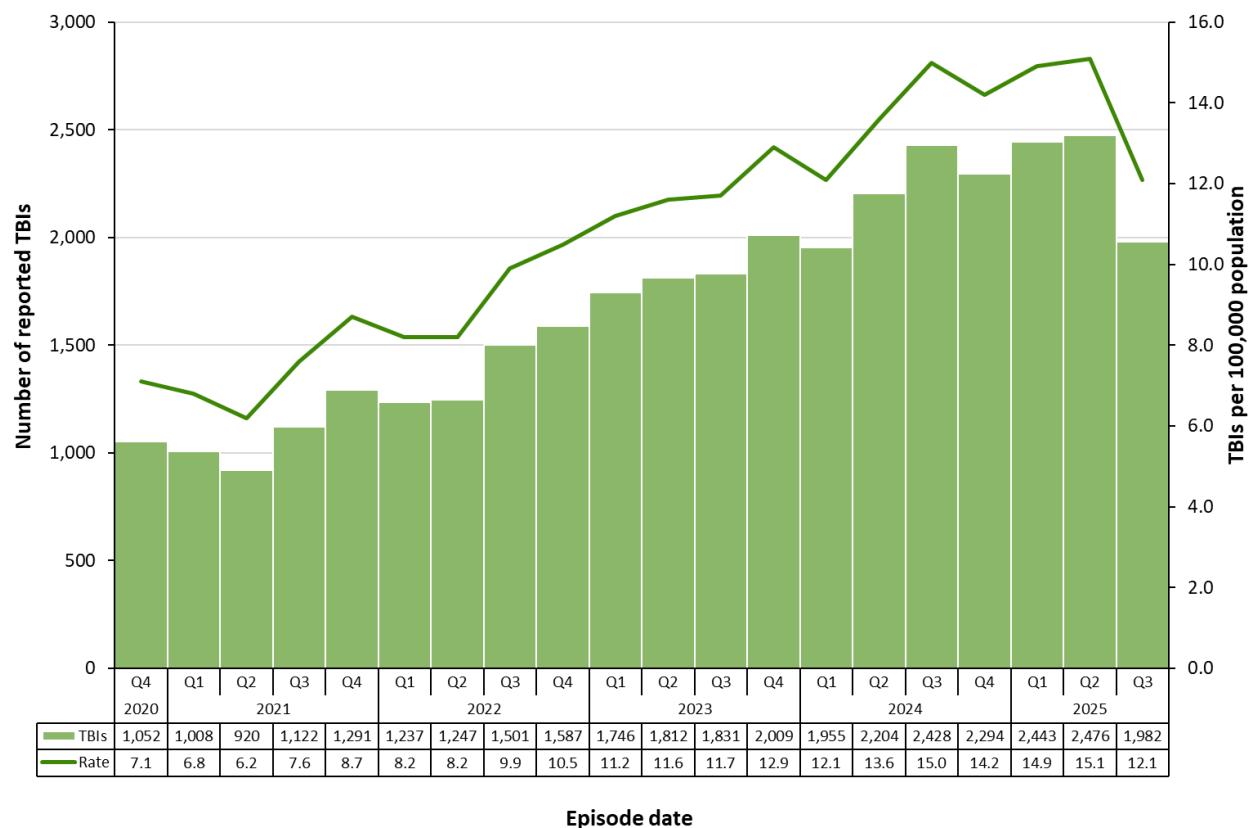
Data sources: Cases: Integrated Public Health Information System (iPHIS). Population denominators: Ontario Ministry of Finance.<sup>4</sup>

Notes: Q1=January 1-March 31; Q2=April 1-June 30; Q3=July 1-September 30; Q4=October 1-December 31  
The public health units that make up each provincial region can be found in [Appendix A](#).

# TB Infections

## Quarterly Trends

**Figure 6: Reported TBI Cases and Rates Per 100,000 Population by Episode Date: October 1, 2020 to September 30, 2025**

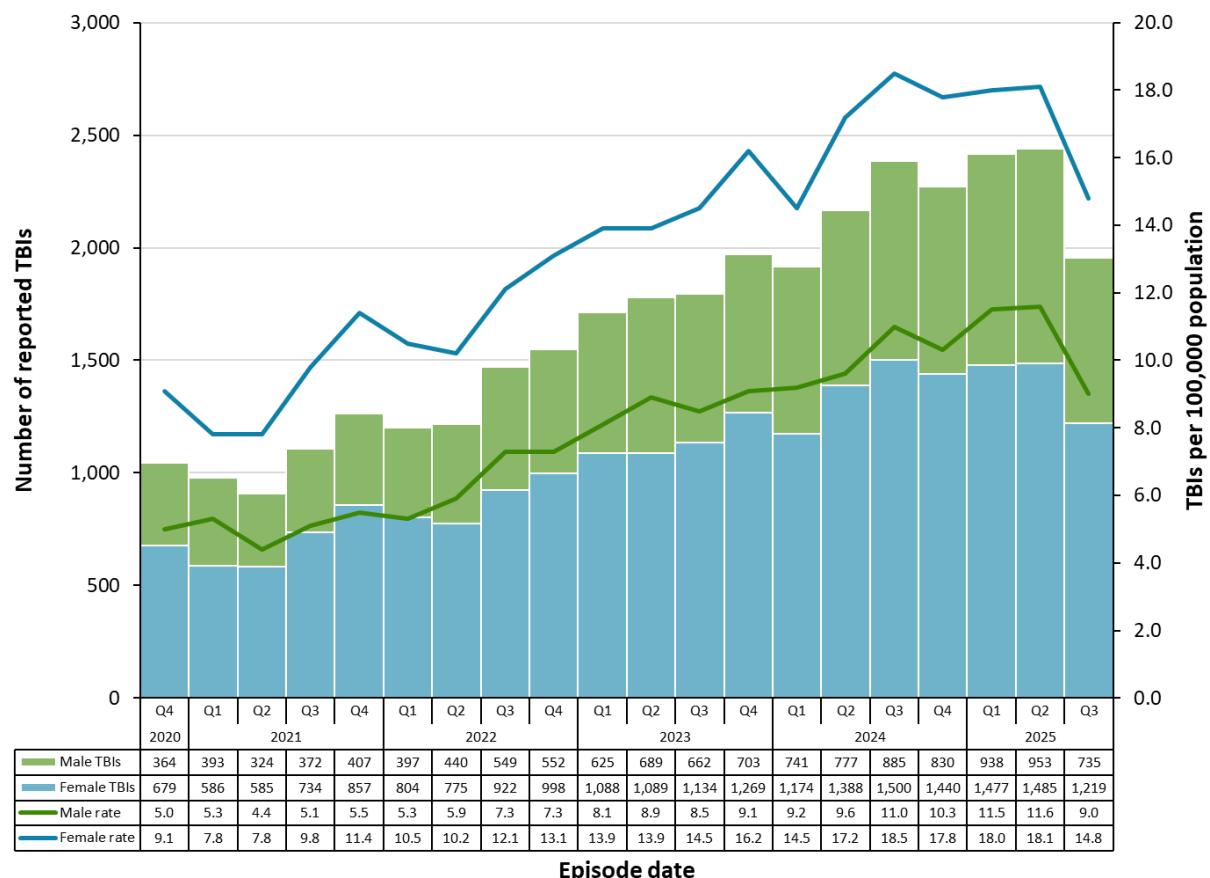


Data sources: TBIs: Integrated Public Health Information System (iPHIS). Population denominators: Ontario Ministry of Finance.<sup>4</sup>

Note: Q1=January 1-March 31; Q2=April 1-June 30; Q3=July 1-September 30; Q4=October 1-December 31

## Sex and Age Group

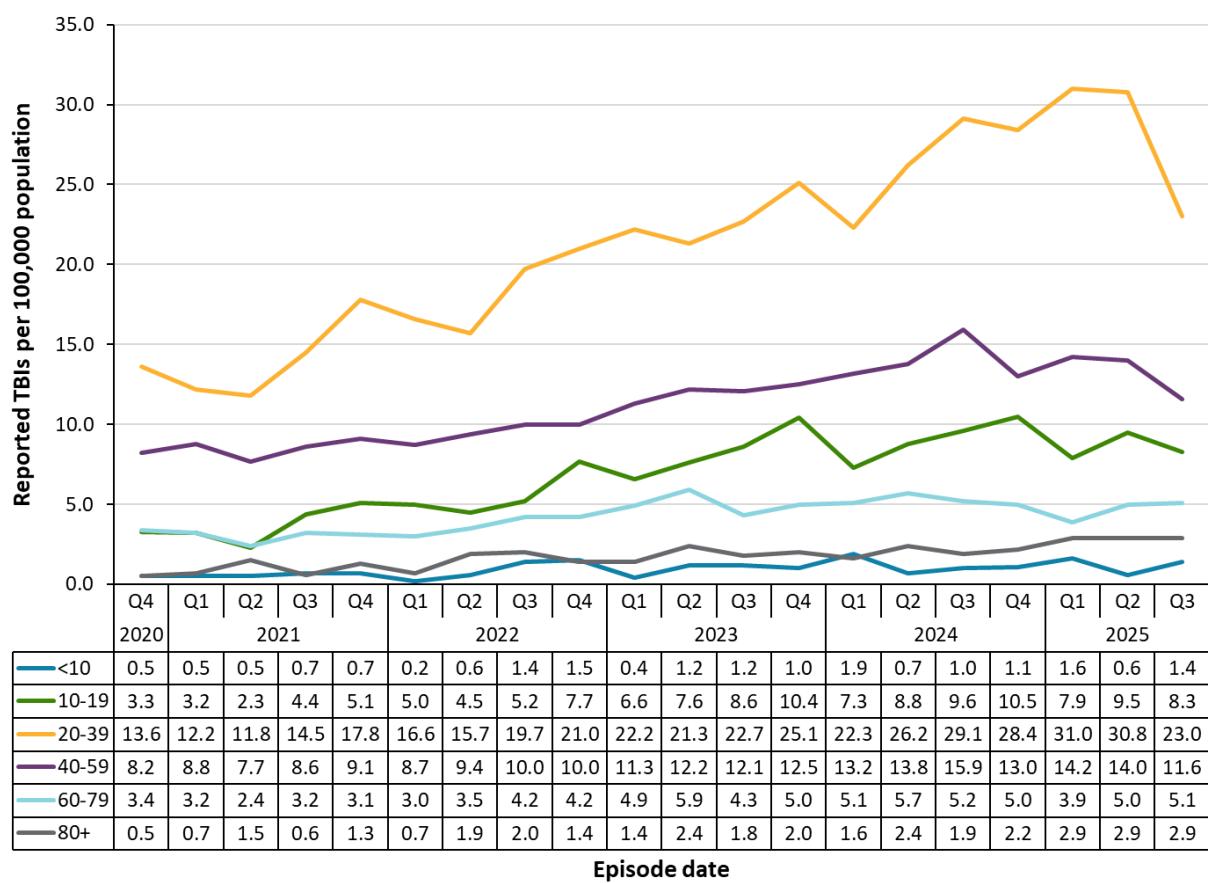
**Figure 7: Reported TBI Cases and Rates Per 100,000 Population by Sex and Episode Date: October 1, 2020 to September 30, 2025**



Data sources: TBIs: Integrated Public Health Information System (iPHIS)Population denominators: Ontario. Ministry of Finance.<sup>4</sup>

Note: Q1=January 1–March 31; Q2=April 1–June 30; Q3=July 1–September 30; Q4=October 1–December 31.  
Excludes reported cases of TBI that did not identify as male or female.

**Figure 8: Reported TBI Rates Per 100,000 Population by Age Group (years): October 1, 2020 to September 30, 2025**

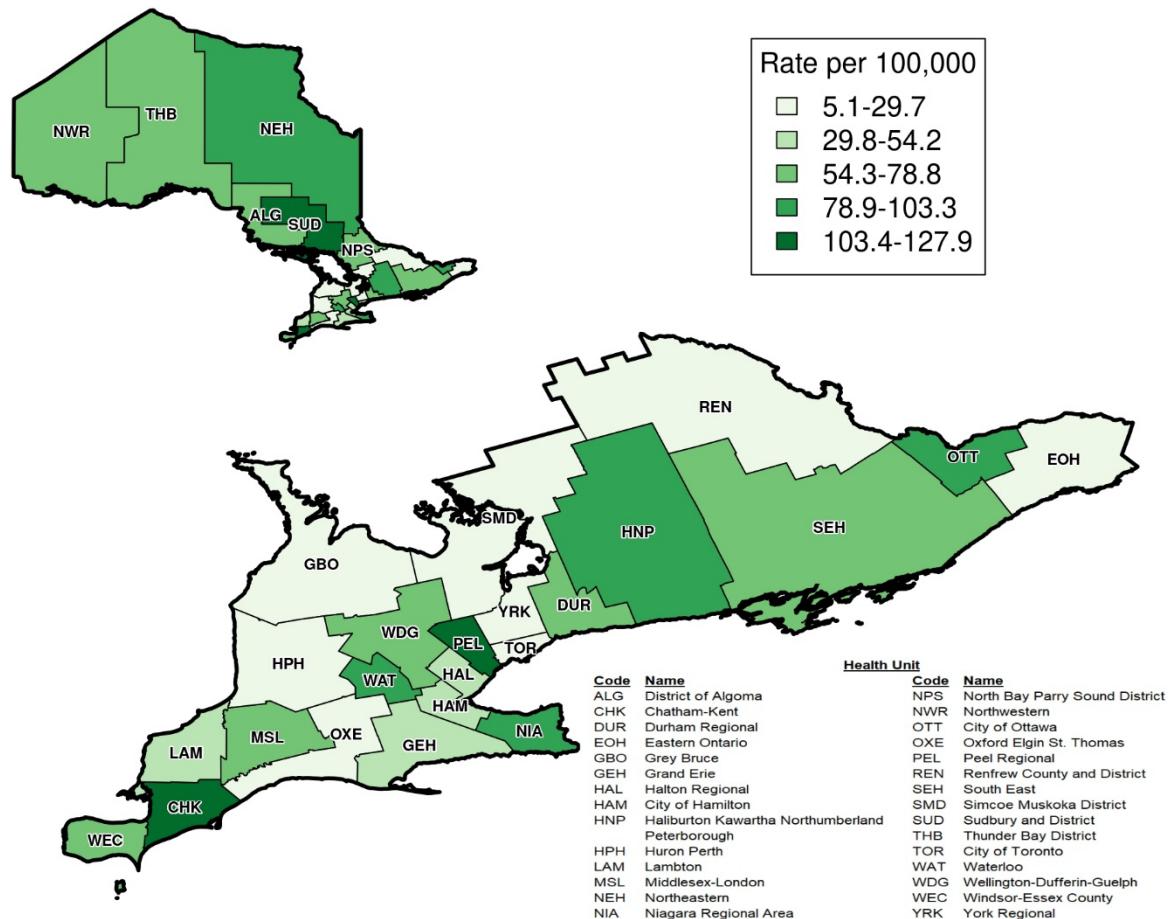


Data sources: TBIs: Integrated Public Health Information System (iPHIS). Population denominators: Ontario Ministry of Finance.<sup>4</sup>

Note: Q1=January 1-March 31; Q2=April 1-June 30; Q3=July 1-September 30; Q4=October 1-December 31. Unknown ages were excluded from analyses.

## Geography

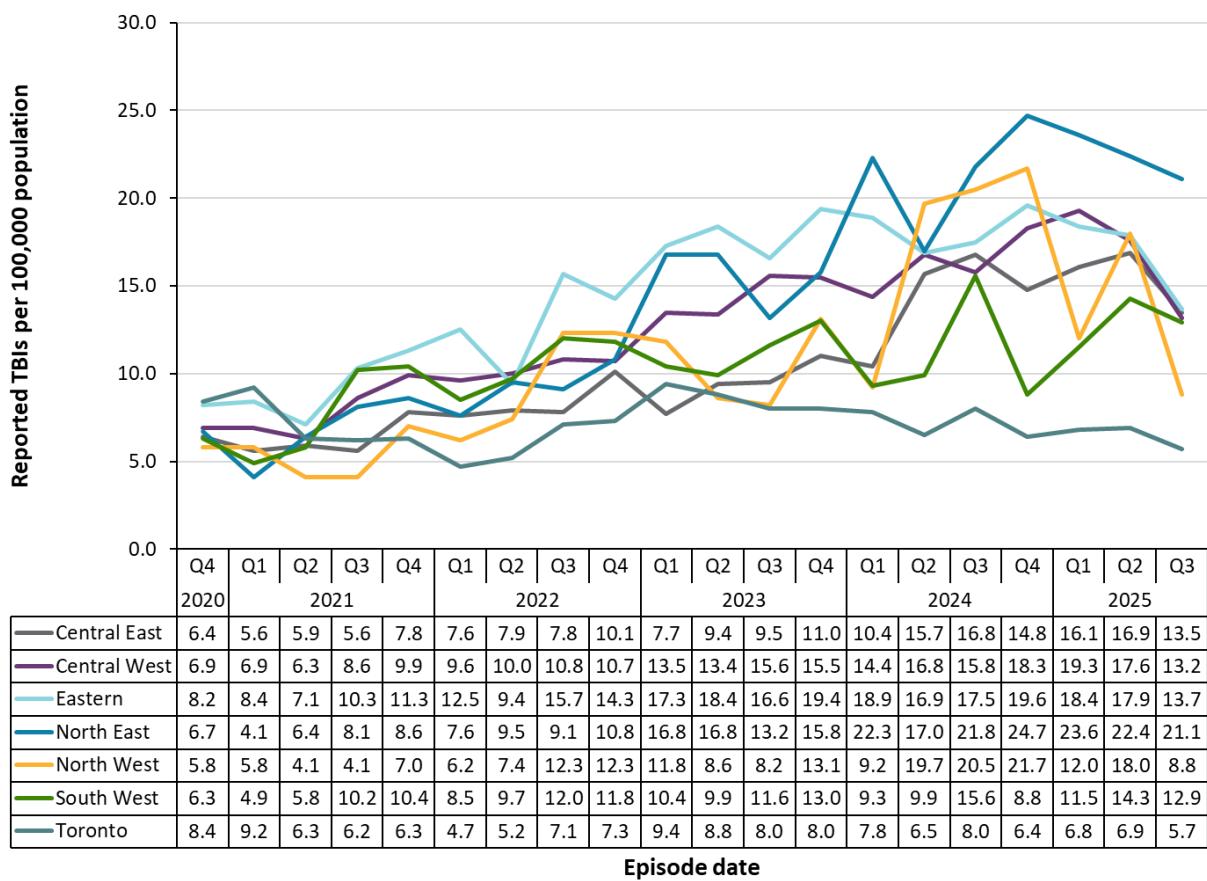
**Figure 9: Reported TBI Rates Per 100,000 Population by Public Health Unit: October 1, 2024 to September 30, 2025 (i.e., last 12 months)**



Data sources: TBIs: Integrated Public Health Information System (iPHIS). Population denominators: Ontario. Ministry of Finance.<sup>4</sup>

Note: See [Appendix B](#) for the full list of public health unit names and their 3-letter abbreviations, as well as annual rates by PHU for the years 2020-2025.

**Figure 10: Reported TBI Rates Per 100,000 Population by Provincial Region: October 1, 2020 to September 30, 2025**



Data sources: TBIs: Integrated Public Health Information System (iPHIS). Population denominators: Ontario Ministry of Finance.<sup>4</sup>

Notes: Q1=January 1-March 31; Q2=April 1-June 30; Q3=July 1-September 30; Q4=October 1-December 31

The public health units that make up each provincial region can be found in [Appendix B](#).

# Technical Notes

## Data Sources

### Case Data

- The data for the main portion of this report were based on information entered in the Ontario Ministry of Health (MOH) integrated Public Health Information System (iPHIS) database as of **January 5, 2026 at 9:00 a.m.**
- iPHIS is a dynamic disease reporting system that allows ongoing updates to previously entered data. As a result, data extracted from iPHIS represent a snapshot at the time of extraction and may differ from previous or subsequent reports.

### Ontario Population Data

- Population estimates used to calculate rates per 100,000 population were calculated using the Ontario population estimates for 2020-2023 and population projections for 2024-2025 sourced from the Ontario Ministry of Finance.

### Data Caveats

- Data reported between 2020 and 2022 should be interpreted with caution. Both testing and iPHIS data entry practices were likely impacted by the COVID-19 pandemic response.
- These data only represent confirmed cases of tuberculosis (TB) disease and TB infection (TBI) reported to public health and recorded in iPHIS. As a result, all case counts are subject to varying degrees of underreporting due to a variety of factors, such as disease awareness and medical care seeking behaviours that may depend on severity of illness, clinical practices, and changes in laboratory testing and reporting behaviours.
- This report includes data up to the end of the quarter that finished three months prior to data extraction because TB disease and TBI counts and corresponding data can take several months to stabilize.
- Only TB disease and TBI cases meeting the confirmed case classification as listed in the [Ontario MOH surveillance case definitions<sup>1</sup>](#) are included in the reported case counts.
  - Changes to provincial surveillance case definitions and disease classifications have occurred over the years and thus may impact the analysis and interpretation of trends over time. Cases are classified in iPHIS based on the Ontario MOH surveillance case definitions in use at the time the case was identified.
  - PHO's technical report, "[Factors Affecting Reporting Diseases in Ontario: Case Definition Changes and Associated Trends 1991-2016<sup>5</sup>](#)" and its associated [appendix<sup>6</sup>](#) provide more detailed information on this topic.
- TB disease cases are reported based on the Diagnosis Date. TBIs are reported based on the Episode Date, which is an estimate of the onset date of disease for a case. In order to determine this date, the following hierarchy exists in iPHIS: Onset Date > Specimen Collection Date > Lab Test Date > Reported Date.
  - For example: If an Onset Date exists, it will be used as the Episode Date. If Onset Date is not available, then the next available date in the hierarchy (i.e., Specimen Collection Date) will be used, and so on.

- Case counts by geography are based on the diagnosing health unit (DHU). DHU refers to the case's public health unit of residence at the time of illness onset or report to public health and not necessarily the location of exposure.
- The public health units that make up each geographic region can be found in [Appendix A](#).
- Cases for which the Disposition Status was reported as ENTERED IN ERROR, DOES NOT MEET DEFINITION, DUPLICATE-DO NOT USE, or any variation on these values, were excluded from this analysis.
  - TBI episodes generally do not have a diagnosis status reported in iPHIS, however, those with a diagnosis status entered as 'Does Not Meet Definition' were also excluded from analyses.
- The potential for duplicates exists because duplicate sets were not identified and excluded unless they were already resolved at either the local or provincial level prior to data extraction from iPHIS.

## References

1. Ontario. Ministry of Health. Ontario public health standards: requirements for programs, services and accountability. Infectious disease protocol. Appendix 1: case definitions and disease-specific information. Disease: Tuberculosis. Effective: May 2022 [Internet]. Toronto, ON: King's Printer for Ontario; 2022 [cited 2025 Apr 7]. Available from: <https://files.ontario.ca/moh-ops-tuberculosis-en-2022.pdf>
2. Ontario Agency for Health Protection and Promotion (Public Health Ontario). Tuberculosis (TB) [Internet]. Toronto, ON: King's Printer for Ontario; 2024 [updated 2024 Dec 13; cited 2025 Apr 7]. Available from: <https://www.publichealthontario.ca/en/diseases-and-conditions/infectious-diseases/respiratory-diseases/tuberculosis>
3. World Health Organization (WHO). Framework towards TB elimination in low-incidence countries [Internet]. Geneva: WHO; 2014 [cited 2025 Jan 15]. Available from: <https://www.who.int/publications/i/item/9789241507707>
4. Population Reporting. Population projections public health unit, 2023-2046 [data file]. Toronto, ON: Ontario. Ministry of Finance [producer]; Toronto, ON: Ontario. Ministry of Health, IntelliHealth Ontario [distributor]; [extracted 2025 Apr 7].
5. Ontario Agency for Health Protection and Promotion (Public Health Ontario). Factors affecting reportable diseases in Ontario (1991-2016) [Internet]. Toronto, ON: Queen's Printer for Ontario; 2018 [cited 2025 Jan 15]. Available from: <https://www.publichealthontario.ca/-/media/documents/F/2018/factors-reportable-diseases-ontario-1991-2016.pdf>
6. Ontario Agency for Health Protection and Promotion (Public Health Ontario). Appendix: factors affecting case definition changes in Ontario (1991-2016) [Internet]. Toronto, ON: Queen's Printer for Ontario; 2018 [cited 2025 Jan 15]. Available from: [https://www.publichealthontario.ca/-/media/documents/a/2018/appendix-factors-reportable-diseases-ontario-1991-2016.pdf?sc\\_lang=en](https://www.publichealthontario.ca/-/media/documents/a/2018/appendix-factors-reportable-diseases-ontario-1991-2016.pdf?sc_lang=en)

## Appendix A: TB Disease Cases and Rates

Table A1: TB Disease Case Counts and Rates Per 100,000 Population by Public Health Unit, Region and Year: Ontario, 2020-2025

Public Health Unit	3-Letter Code	2020 n (rate)	2021 n (rate)	2022 n (rate)	2023 n (rate)	2024 n (rate)	2025* n (rate)
Durham Region Health Department	DUR	10 (1.4)	15 (2.1)	25 (3.4)	30 (3.9)	39 (4.9)	20 (2.5)
Haliburton Kawartha Northumberland Peterborough Health Unit	HNP	4 (1.2)	3 (0.9)	3 (0.8)	3 (0.8)	5 (1.3)	2 (0.5)
Peel Public Health	PEL	145 (9.5)	157 (10.4)	175 (11.4)	198 (12.5)	182 (11.0)	124 (7.4)
Simcoe Muskoka District Health Unit	SMD	10 (1.6)	5 (0.8)	4 (0.6)	9 (1.4)	13 (1.9)	7 (1.0)
York Region Public Health	YRK	64 (5.3)	59 (4.8)	69 (5.6)	74 (5.9)	64 (5.0)	59 (4.6)
<b>CENTRAL EAST</b>	<b>n/a</b>	<b>233 (5.3)</b>	<b>239 (5.4)</b>	<b>276 (6.1)</b>	<b>314 (6.8)</b>	<b>303 (6.3)</b>	<b>212 (4.4)</b>
City of Hamilton Public Health Services	HAM	25 (4.2)	20 (3.4)	25 (4.1)	24 (3.9)	34 (5.4)	33 (5.1)
Grand Erie Public Health	GEH	0 (0.0)	3 (1.1)	3 (1.0)	4 (1.3)	4 (1.3)	3 (1.0)
Halton Region Public Health	HAL	17 (2.8)	24 (3.9)	17 (2.7)	25 (3.9)	18 (2.7)	16 (2.4)
Niagara Region Public Health	NIA	9 (1.8)	9 (1.8)	12 (2.4)	19 (3.6)	14 (2.6)	10 (1.8)
Region of Waterloo Public Health and Emergency Services	WAT	15 (2.5)	17 (2.8)	23 (3.6)	17 (2.5)	23 (3.2)	35 (4.7)
Wellington-Dufferin-Guelph Public Health	WDG	6 (1.9)	6 (1.9)	6 (1.8)	10 (3.0)	13 (3.8)	12 (3.4)
<b>CENTRAL WEST</b>	<b>n/a</b>	<b>72 (2.5)</b>	<b>79 (2.7)</b>	<b>86 (2.9)</b>	<b>99 (3.2)</b>	<b>106 (3.3)</b>	<b>109 (3.3)</b>
Ottawa Public Health	OTT	53 (5.0)	61 (5.7)	60 (5.5)	69 (6.2)	91 (7.9)	74 (6.3)
Eastern Ontario Health Unit	EOH	1 (0.5)	2 (0.9)	0 (0.0)	2 (0.9)	1 (0.4)	4 (1.7)
Renfrew County and District Health Unit	REN	0 (0.0)	0 (0.0)	1 (0.9)	0 (0.0)	1 (0.9)	1 (0.8)
South East Health Unit	SEH	9 (1.6)	8 (1.4)	3 (0.5)	6 (1.0)	14 (2.3)	6 (1.0)

Public Health Unit	3-Letter Code	2020 n (rate)	2021 n (rate)	2022 n (rate)	2023 n (rate)	2024 n (rate)	2025* n (rate)
<b>EASTERN</b>	n/a	<b>63 (3.2)</b>	<b>71 (3.6)</b>	<b>64 (3.2)</b>	<b>77 (3.7)</b>	<b>107 (5.0)</b>	<b>85 (3.9)</b>
Algoma Public Health	ALG	0 (0.0)	1 (0.9)	2 (1.7)	1 (0.8)	2 (1.6)	1 (0.8)
North Bay Parry Sound District Health Unit	NPS	2 (1.5)	0 (0.0)	1 (0.7)	0 (0.0)	1 (0.7)	0 (0.0)
Northeastern Public Health	NEH	5 (4.2)	6 (5.0)	8 (6.6)	24 (19.5)	17 (13.5)	17 (13.4)
Public Health Sudbury & Districts	SUD	0 (0.0)	2 (1.0)	0 (0.0)	3 (1.4)	13 (5.8)	4 (1.7)
<b>NORTH EAST</b>	n/a	<b>7 (1.2)</b>	<b>9 (1.5)</b>	<b>11 (1.9)</b>	<b>28 (4.6)</b>	<b>33 (5.3)</b>	<b>22 (3.5)</b>
Northwestern Health Unit	NWR	6 (7.3)	1 (1.2)	8 (9.6)	8 (9.6)	7 (8.4)	5 (6.0)
Thunder Bay District Health Unit	THB	6 (3.8)	6 (3.8)	5 (3.1)	4 (2.5)	15 (9.1)	8 (4.8)
<b>NORTH WEST</b>	n/a	<b>12 (5.0)</b>	<b>7 (2.9)</b>	<b>13 (5.3)</b>	<b>12 (4.9)</b>	<b>22 (8.8)</b>	<b>13 (5.2)</b>
Chatham-Kent Public Health	CHK	0 (0.0)	0 (0.0)	0 (0.0)	1 (0.9)	0 (0.0)	0 (0.0)
Grey Bruce Health Unit	GBO	0 (0.0)	1 (0.6)	0 (0.0)	1 (0.5)	0 (0.0)	1 (0.5)
Huron Perth Public Health	HPH	0 (0.0)	1 (0.7)	0 (0.0)	0 (0.0)	3 (1.9)	1 (0.6)
Lambton Public Health	LAM	1 (0.7)	0 (0.0)	1 (0.7)	1 (0.7)	1 (0.7)	1 (0.7)
Middlesex-London Health Unit	MSL	15 (2.9)	20 (3.8)	23 (4.2)	9 (1.6)	33 (5.6)	20 (3.3)
Southwestern Public Health	OXE	1 (0.5)	3 (1.3)	2 (0.9)	4 (1.7)	0 (0.0)	0 (0.0)
Windsor-Essex County Health Unit	WEC	11 (2.5)	11 (2.5)	8 (1.8)	9 (1.9)	16 (3.2)	13 (2.6)
<b>SOUTH WEST</b>	n/a	<b>28 (1.6)</b>	<b>36 (2.0)</b>	<b>34 (1.9)</b>	<b>25 (1.3)</b>	<b>53 (2.7)</b>	<b>36 (1.8)</b>
Toronto Public Health	TOR	272 (9.2)	283 (9.7)	297 (9.9)	333 (10.7)	372 (11.5)	238 (7.3)
<b>TORONTO</b>	n/a	<b>272 (9.2)</b>	<b>283 (9.7)</b>	<b>297 (9.9)</b>	<b>333 (10.7)</b>	<b>372 (11.5)</b>	<b>238 (7.3)</b>
<b>TOTAL</b>	n/a	<b>687 (4.7)</b>	<b>724 (4.9)</b>	<b>781 (5.2)</b>	<b>888 (5.7)</b>	<b>996 (6.2)</b>	<b>715 (4.4)</b>

Data sources: Cases: iPHIS. [Database; extracted 5 Jan 2026]. Population denominators: Ministry of Finance.<sup>4</sup>

\*2025 includes data from January 1 to September 30 only.

## Appendix B: Reported TB Infections and Rates

**Table B1: Reported TB Infections and Rate Per 100,000 Population by Public Health Unit, Region and Year: Ontario, 2020-2025**

Public Health Unit	3-Letter Code	2020 n (rate)	2021 n (rate)	2022 n (rate)	2023 n (rate)	2024 n (rate)	2025* n (rate)
Durham Region Health Department	DUR	166 (23.3)	191 (26.3)	331 (44.4)	371 (48.4)	570 (72.0)	411 (50.7)
Haliburton Kawartha Northumberland Peterborough Health Unit	HNP	28 (8.1)	55 (15.7)	103 (28.8)	233 (63.5)	349 (92.6)	289 (75.5)
Peel Public Health	PEL	805 (52.8)	625 (41.3)	767 (50.2)	798 (50.3)	1,479 (89.6)	1,293 (77.2)
Simcoe Muskoka District Health Unit	SMD	56 (9.2)	40 (6.4)	45 (7.0)	57 (8.6)	65 (9.5)	75 (10.7)
York Region Public Health	YRK	229 (18.9)	191 (15.6)	258 (21.0)	283 (22.7)	286 (22.5)	189 (14.7)
<b>CENTRAL EAST</b>	<b>n/a</b>	<b>1,284 (29.1)</b>	<b>1,102 (24.8)</b>	<b>1,504 (33.4)</b>	<b>1,742 (37.6)</b>	<b>2,749 (57.6)</b>	<b>2,257 (46.5)</b>
City of Hamilton Public Health Services	HAM	199 (33.8)	247 (41.6)	320 (53.1)	410 (66.6)	390 (61.6)	250 (38.8)
Grand Erie Public Health	GEH	22 (8.0)	18 (6.4)	42 (14.6)	67 (22.6)	84 (27.4)	99 (31.7)
Halton Region Public Health	HAL	123 (20.1)	143 (23.0)	138 (21.9)	173 (26.9)	276 (41.9)	212 (31.6)
Niagara Region Public Health	NIA	123 (25.1)	171 (34.4)	217 (42.7)	322 (61.3)	477 (87.5)	363 (65.3)
Region of Waterloo Public Health and Emergency Services	WAT	238 (39.2)	264 (43.0)	383 (60.0)	565 (83.7)	640 (88.4)	517 (69.5)
Wellington-Dufferin-Guelph Public Health	WDG	51 (16.1)	85 (26.5)	128 (39.1)	258 (77.3)	226 (66.1)	201 (57.6)
<b>CENTRAL WEST</b>	<b>n/a</b>	<b>756 (26.2)</b>	<b>928 (31.7)</b>	<b>1,228 (41.0)</b>	<b>1,795 (58.1)</b>	<b>2,093 (65.2)</b>	<b>1,642 (50.1)</b>
Ottawa Public Health	OTT	413 (39.3)	605 (57.0)	697 (64.3)	995 (89.3)	1,160 (100.8)	720 (61.2)
Eastern Ontario Health Unit	EOH	8 (3.7)	5 (2.3)	10 (4.5)	16 (7.0)	16 (6.8)	8 (3.4)
Renfrew County and District Health Unit	REN	5 (4.5)	11 (9.8)	10 (8.8)	25 (21.8)	31 (26.6)	25 (21.2)
South East Health Unit	SEH	157 (27.5)	112 (19.3)	327 (55.2)	444 (73.5)	340 (54.9)	328 (52.1)
<b>EASTERN</b>	<b>n/a</b>	<b>583 (29.9)</b>	<b>733 (37.1)</b>	<b>1,044 (51.8)</b>	<b>1,480 (71.7)</b>	<b>1,547 (72.9)</b>	<b>1,081 (50.0)</b>

Public Health Unit	3-Letter Code	2020 n (rate)	2021 n (rate)	2022 n (rate)	2023 n (rate)	2024 n (rate)	2025* n (rate)
Algoma Public Health	ALG	28 (23.8)	16 (13.6)	36 (30.0)	63 (50.8)	103 (80.1)	56 (43.1)
North Bay Parry Sound District Health Unit	NPS	32 (24.2)	36 (26.8)	55 (39.9)	83 (58.4)	70 (47.6)	80 (53.7)
Northeastern Public Health	NEH	20 (16.8)	31 (26.0)	45 (37.3)	87 (70.6)	138 (109.3)	62 (48.8)
Public Health Sudbury & Districts	SUD	64 (30.6)	75 (35.7)	83 (38.9)	147 (67.2)	228 (100.9)	228 (99.6)
<b>NORTH EAST</b>	<b>n/a</b>	<b>144 (24.9)</b>	<b>158 (27.2)</b>	<b>219 (37.0)</b>	<b>380 (62.5)</b>	<b>539 (85.9)</b>	<b>426 (67.1)</b>
Northwestern Health Unit	NWR	24 (29.1)	18 (21.6)	31 (37.3)	38 (45.7)	41 (49.0)	32 (38.1)
Thunder Bay District Health Unit	THB	20 (12.5)	33 (20.8)	62 (38.8)	64 (39.5)	136 (82.2)	65 (39.0)
<b>NORTH WEST</b>	<b>n/a</b>	<b>44 (18.2)</b>	<b>51 (21.1)</b>	<b>93 (38.3)</b>	<b>102 (41.6)</b>	<b>177 (71.1)</b>	<b>97 (38.7)</b>
Chatham-Kent Public Health	CHK	6 (5.6)	12 (11.1)	20 (18.3)	30 (27.0)	93 (82.2)	117 (102.2)
Grey Bruce Health Unit	GBO	2 (1.1)	4 (2.2)	21 (11.3)	13 (6.9)	19 (9.8)	26 (13.2)
Huron Perth Public Health	HPH	7 (4.8)	17 (11.4)	15 (9.9)	22 (14.3)	26 (16.6)	21 (13.2)
Lambton Public Health	LAM	24 (17.9)	25 (18.6)	35 (25.4)	41 (29.1)	48 (32.9)	32 (21.7)
Middlesex-London Health Unit	MSL	199 (38.4)	307 (58.5)	376 (69.3)	365 (64.8)	317 (53.5)	271 (44.6)
Southwestern Public Health	OXE	18 (8.2)	28 (12.4)	26 (11.3)	41 (17.4)	52 (21.5)	33 (13.4)
Windsor-Essex County Health Unit	WEC	172 (39.2)	159 (36.1)	267 (59.0)	325 (69.4)	291 (59.1)	265 (52.9)
<b>SOUTH WEST</b>	<b>n/a</b>	<b>428 (24.6)</b>	<b>552 (31.3)</b>	<b>760 (42.0)</b>	<b>837 (44.9)</b>	<b>846 (43.7)</b>	<b>765 (38.7)</b>
Toronto Public Health	TOR	1,074 (36.4)	817 (28.0)	724 (24.3)	1,062 (34.1)	930 (28.8)	633 (19.4)
<b>TORONTO</b>	<b>n/a</b>	<b>1,074 (36.4)</b>	<b>817 (28.0)</b>	<b>724 (24.3)</b>	<b>1,062 (34.1)</b>	<b>930 (28.8)</b>	<b>633 (19.4)</b>
<b>TOTAL</b>	<b>n/a</b>	<b>4,313 (29.2)</b>	<b>4,341 (29.2)</b>	<b>5,572 (36.8)</b>	<b>7,398 (47.4)</b>	<b>8,881 (55.0)</b>	<b>6,901 (42.0)</b>

Data sources: TBIs: iPHIS. [Database; extracted 5 Jan 2026]. Population denominators: Ministry of Finance.<sup>4</sup>

\*2025 includes data from January 1 to September 30 only.

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## Public Health Ontario

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