**Aim**

The aim of this report is to establish whether data from a critical analysis of good practice guidelines are coherent with the information in the application from the Caisse nationale d’assurance maladie des travailleurs salariés (CNAMTS [National Health insurance fund for salaried workers]) and therefore support this application for the inclusion of IGRA tests on the list of procedures and services reimbursed by National Health Insurance.

**Conclusions**

As there is consistency between the conclusions of the analysis of the guidelines and the information in the application for including the tests, HAS considers that IGRA tests can be used for diagnosis in the following indications proposed by CNAMTS:

- in “migrant children aged under 15 years”, subject to the following two additions:
  - add the migrants’ origin: “migrant children aged under 15 years coming from a region with high rates of tuberculosis”,
  - specify that in children aged under five years, these tests should only be used following discussion with clinical and laboratory staff, in view of the limited data currently available on using IGRA tests in these children;
- in HIV-positive patients, to screen for latent tuberculous infection (LTBI) as part of the initial assessment of their infection:
  - with the option of repeating an IGRA test to check an uncertain or negative result obtained from initial IGRA testing;
  - to help with diagnosing tuberculosis disease in cases of extrapulmonary tuberculosis and with difficult diagnosis in children.

In addition, HAS agrees with the applicant regarding the need to include both the quantitative results and the interpretation of IGRA tests in reports.

In accordance with the March 2015 road map, without a new assessment, HAS also renews its favourable opinion (issued in December 2006) on the indication for IGRA testing before starting treatment with TNF-alpha inhibitors.

**Methods**

The method selected was a short procedure involving the following steps:

1. Identifying good practice guidelines through a comprehensive literature search;
2. Selecting guidelines with an adequately developed methodological quality;
3. Analysis of coherence and writing a short rationale;
4. Submitting the rationale directly to the HAS Board for approval.

**Written by**

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