TB and HIV co-infection is considered to occur worldwide. In 2013 of the estimated 9 million people who developed TB an estimated 1.1 million (13%) were HIV positive. There were also in 2013 360,000 deaths from HIV associated TB equivalent to 25% of all TB deaths, and around 25% of the estimated 1.5 million deaths from HIV/AIDS.

Immunosuppression by HIV makes patients vulnerable to be infected with TB and they are more prone to get severe disease. Both TB and HIV have profound effects on the immune system, as they are capable of disarming the host’s immune responses through mechanisms that are not fully understood. HIV coinfection is the most powerful known risk factor for progression of Mycobacterium tuberculosis infection to active disease, increasing the risk of latent TB reactivation 20-fold.

Prevalence of TB and HIV in Sri Lanka is 4.2% and < 0.1% respectively. Relationship between HIV and TB is not yet clearly defined in Sri Lanka. The objective of this preliminary study is to describe the epidemiology of HIV – TB co-infection in Sri Lanka.

Patients were 17 to 54 years of age. Male: Female = 33:21. 38 and 16 patients had pulmonary and extrapulmonary TB respectively. Only 02 male patients had positive ELISA test for HIV but both were negative for western blot test.

HIV – TB co-infection is not a significant occurrence in Sri Lanka yet. There for HIV should not be considered as an important predisposing factor for TB in Sri Lanka and It is not rational to screen all TB patients for HIV as it is not cost effective for a resource poor country.