

Tuberculosis

Patient Information



Tuberculosis

What is Tuberculosis?

Tuberculosis or TB is an infection caused by bacteria called Mycobacterium Tuberculosis, which is spread from one person to the other. TB most commonly damages the lungs but can affect any other part of the body, including the spine, lymph nodes, kidneys, joints, intestines and the brain. With proper and timely treatment, TB is curable. Left untreated or not treated properly, TB can prove fatal.

How does TB spread?

Tuberculosis is spread through the air (droplet infection) when people suffering from TB of the lung cough, sneeze, talk or spit. A person in close contact with the patient can inhale these germs and can develop tuberculosis.

Overcrowding, poor ventilation and poor hygiene aid the spread of tuberculosis.

What are the symptoms of TB?

- Fever and night sweats
- Cough (with or without bloody sputum) that lasts for more than 3 weeks
- Weight loss
- Loss of appetite
- Shortness of breath
- Chest pain
- Other symptoms, depending on the part(s) of the body involved.

Who is at Risk?

The risk of infection depends on the extent of a person's exposure to infected droplets and the individual's susceptibility to infection. The risk of infection is high for those in close contact with a person with sputum positive (TB germ is present in sputum) pulmonary TB. People who suffer from malnutrition, HIV infection and or have uncontrolled diabetes, are at an increased risk due to a weakened system.

How is TB Diagnosed?

To test for TB, the sputum is tested for the presence of the TB germ under a microscope. Three early morning sputum samples are recommended. If sputum contains the TB germ, infection is indicated. A chest X-ray will then be done to confirm the presence of pulmonary TB and what damage has been by it. A biopsy of the

affected organ such as lymph node, liver or bone may be required occasionally to confirm the diagnosis.

What happens if TB is left untreated?

Without treatment, the majority of the people with active TB die. An untreated patient is also a major risk to the people around them. On average, a patient with lung TB infects 15-20 people in one year.

How is TB treated?

TB is treated with medicines. You will be given a combination of four different medicines initially for a period of two months. After two months, your sputum will be tested again for germs. If you are making good progress, your medicines will be reduced to two drugs for a further period of four to six months.

The total duration of treatment ranges between six and eight months. To make sure treatment is effective, make sure you take your medicines regularly, and do not stop until cleared by your doctor.

Why is it necessary to take all the medicines?

If you take medicines as prescribed, you have a 95 per cent chance of being cured. You will start feeling better in a few weeks but do not stop taking your pills. TB germs may still be alive and hiding in remote parts of your lungs, and they can multiply rapidly and cause problems. As such, it is important that the full course of six to eight months is followed.

Do anti-TB drugs have side effects?

Nausea and vomiting are common side effect of TB but usually settle after the first few days of the start of treatment. Occasional itching and joint pains may also be experienced.

One of the TB medicines causes urine to turn orange; this is no cause for concern. In general, anti-TB drugs are safe and do not cause major side effects. One should not stop taking anti- TB medicines because of these minor side effects.

However, if you notice yellow eyes or skin (signs of jaundice), visit your doctor immediately.

Pregnant and lactating women can also take TB medicines without fear.

How can transmission of TB be prevented?

The following can help stop spread of TB:

- Cover your face when coughing, sneezing or laughing.
- Minimise close contact, particularly with children, the elderly and people with low immunity, during the first two to four weeks.
- Do not go to work or school for a few weeks. Keep interactions to a minimum.
- Keep your room and home well-ventilated.
- Make sure there is adequate sunlight.
- Get your child vaccinated with BCG within the 1st week of birth.
- Take medicines regularly for the full prescribed course.

The only sure way of protection from TB is to ensure that every TB patient receives a full course of anti-TB treatment.

Stopping treatment prematurely can be dangerous.

Take the full dose of medicines as prescribed. Under dosing creates a dangerous form of TB called multi-drug resistant TB, which does not respond to conventional medicines treatment. Therefore, stopping treatment prematurely can be dangerous.