

What is Tuberculosis?

Tuberculosis (TB) is a curable disease caused by the bacteria (germ) *Mycobacterium Tuberculosis*. TB can damage a person's lungs or other parts of the body and cause serious illness. In Australia there are approximately 1000 cases of TB each year. There is excellent antibiotic treatment available and complete recovery is expected.

How is TB spread?

TB spreads through the air when a person with TB disease in the lungs or throat, coughs, sneezes or speaks, sending germs into the air. When other people breathe in these germs they may become infected. Most people get TB germs from someone they spend a lot of time within a confined indoor space. These are most likely to be family members or close friends. TB is not spread by household items such as crockery, drinking glasses, linen or clothes.

What is TB infection?

TB infection means that the germs are in the body but they are inactive. After TB germs enter the body, in most cases, the body's immune system controls the germ. These germs can stay alive in the body for many years in an inactive or dormant state. TB infection does not produce symptoms and does not cause damage to the body and cannot be spread to other people. The person may be infected but they are not sick.

TB infection can be determined with a positive Tuberculin Skin Test or a specific blood test.

When does 'infection' become disease?

It is possible, even after many years, for inactive TB germs to become active. This most commonly happens when the body's immune system is weakened. For example, by serious illness, advanced aged, a stressful event, drug and alcohol abuse, infection with HIV (this is the virus that

causes AIDS) or other chronic conditions. When inactive TB germs become active, TB disease can develop. 10% of people infected with TB may go on to develop TB disease. It is still treatable.

What are the signs of TB Disease?

TB can attack any part of the body. Lungs are the most common site. People with TB disease may have some or all of the following symptoms:

- A cough that lasts for more than 3 weeks.
- Unexplained weight loss.
- Tiredness.
- Fevers, night sweats.
- Loss of appetite.

Sometimes a person with TB disease can cough up blood stained sputum.

What are the common tests for TB?

1. The Tuberculin Skin Test (Mantoux test) and/or an IGRA (blood test) show whether or not the person is likely to have been infected.
2. A chest x-ray scan can show whether TB has affected the lungs
3. A sputum test shows if TB germs are present in phlegm coughed up from the lungs.
4. Biopsy taken from various sites in the body – lung tissue, lymph node tissue can also reveal if TB germs are present.

What should I do if I have contact with a person who has TB disease?

People who require screening are identified by contact tracing procedures and are notified individually. Other people who have concerns that are not answered by reading this fact sheet can call one of the nursing staff at the Department of Respiratory and Sleep Medicine for advice on **6244 2066** Monday - Friday 8.30-5pm, except on public holidays.

How is TB treated?

- TB infection: the doctor may prescribe a course of antibiotics or may advise chest x-ray screening for 3 years or more.
- TB disease: A combination of antibiotics is prescribed for a period of at least 6 months. An expert TB nurse will supervise the therapy, monitor possible side effects and ensure that treatment is completed.

Are people with TB disease always infectious?

People with TB disease of the lungs or throat can be infectious to others. In most cases, after two weeks of taking the prescribed antibiotics, they are no longer considered infectious and can resume normal activities such as school and work. People with TB in other parts of their body are not considered to be infectious.

Who do TB patients need to tell about their disease?

TB is a confidential matter between the patient and the treating doctor. Identified contacts are often family and household members who will be assessed by the expert TB nurses who will provide screening and ongoing follow-up. Sometimes close friends, work or school friends may need to be screened also. They will be contacted and assessed maintaining complete confidentiality.

The Department of Respiratory and Sleep Medicine at The Canberra Hospital provide:

- Care and management of patients with TB.
- Contact tracing and screening.

A referral from your doctor or a Medicare card is **not** needed.

Need more information?

For more information about TB contact the TB Nurses at The Department of Respiratory and Sleep Medicine at Canberra Hospital during business hours on **(02) 6244 2066**. After hours, please call the Health Protection Service, Communicable Disease Control Information Line on **(02) 6205 2155**.

Tuberculosis is a notifiable disease. Cases notified to ACT Health are investigated by TB Nurses at The Department of Respiratory and Sleep Medicine.

**Medical Director and Registered Nurses
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Acknowledgement

NHMRC, 2013, *The Australian Immunisation Handbook*, 10th edition.

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