

Tuberculosis from A-Z

S Are patients with tuberculosis safe to be with or work with?

A patient whose disease is controlled by effective treatment is no danger to others.

T Are any special hygienic precautions necessary for patients?

Yes. Guard against coughing near other people at all times. Ask the doctor or nurse for advice on how to dispose of used tissues properly. Contact with others, particularly with children, should be avoided at certain stages of the illness, but this depends on the individual case. If necessary, seek advice from the doctor.

U Are there any special precautions necessary with bedding or utensils?

No. Thorough, normal cleanliness is all that is necessary. There is no need for procedures such as fumigation, washing walls with lysol or boiling utensils.

V What is a contact?

A contact is someone who has been in contact with a patient suffering from tuberculosis at home, socially or at work. As TB is an infectious disease, contacts run some risk of catching it and should be checked at a chest clinic.

W What is a BCG?

BCG is a vaccine that gives some protection against TB. It is offered where appropriate to certain individuals and groups at high risk in Australia.

X Is treatment free?

All treatment for TB is free at approved chest clinics, hospitals and institutions in Australia.

Y Is there a special tuberculosis allowance?

No. If you are employed and your doctor considers you are not fit to work for a specific period, you may be entitled to a sickness benefit paid through Social Security.

Z Where can I get help or advice?

There are many ready to help in the network of TB and chest clinics that cover Australia. Following is a list of clinics in capital cities:

Sydney
Phone (02) 9828 5980

TB Services
Hugh Jardine
Building
Locked Mail Bag
7017
Liverpool BD 1871

Melbourne
Phone (03) 9637 4115

TB Program
Dept of Human
Services
120 Spencer Street
Melbourne

Brisbane
Phone (07) 3224 5535

Division of
Specialised
Health Services
63 George Street
Brisbane

Adelaide
Phone (08) 8222 5307

Chest Clinic
275 North Terrace
Adelaide

Perth
Phone (08) 9325 3922

Chest Clinic
17 Murray Street
Perth

Hobart
Phone (03) 6222 7293

Chest Clinic
Royal Hobart
Hospital
Hobart

Canberra
Phone (02) 6244 2066

Chest Clinic
Department of
Thoracic Medicine
The Canberra
Hospital
Garran ACT

Darwin
Phone (08) 8922 8522

TB Clinic
Royal Darwin
Hospital
Casuarina



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Tuberculosis from **A to Z** for patients

A What is tuberculosis?

Tuberculosis (TB) is an infectious disease that untreated may lead to death or years of chronic ill health. It can affect people of all ages but is now most common in older persons.

B Is tuberculosis curable?

Yes. TB is almost 100 per cent curable with modern treatment. To be effective, treatment requires the full cooperation of the patient. Early diagnosis, followed by prompt treatment, helps preventing spread to others and in avoiding or diminishing disability after treatment.

C Can a treated patient lead a normal life?

Yes. The outlook has brightened dramatically due to modern drugs. With few exceptions patients return to full work and recreation, even while under treatment.

D What is the cause of tuberculosis?

The only cause is a minute germ – the tubercle bacillus – that can grow and multiply in the body.

E How is tuberculosis spread?

TB is almost entirely an airborne disease spread to healthy individuals by the germs that come from the lungs of an infected person. Such a person may disseminate the bacilli widely by coughing, sneezing, laughing or shouting. The danger is not in the large visible particles but in the tiny droplets that may be inhaled by those in contact. Handling objects that have been used or touched by a patient will not spread TB.

F Is tuberculosis hereditary?

No. This belief arose because those in closest contact with patients are their families, who are then most likely to be infected.

G What parts of the body are usually involved?

The bloodstream may carry the infection to any part of the body, but by far the commonest part infected is the lungs. This is termed pulmonary tuberculosis.

H What tests are done for tuberculosis?

There are a variety of tests, depending on the part of the body infected, but nearly all cases of TB have three tests. These are a chest X-ray, a sputum test and a tuberculin (Mantoux) test.

I Why is an X-ray necessary and what does it show?

An X-ray is necessary because much of the large volume of the lungs may be involved in disease before major symptoms occur. An X-ray will show the tuberculosis process (lesion) and its extent. Some common terms used include: cavity (a hole in the lung eroded by disease); and calcification and fibrosis (some indications of the body's effort to heal, which may be referred to as 'scars').

J What is a sputum test?

This is a test carried out to ascertain whether tubercle bacilli are present in the sputum (phlegm). Their presence is proof of active pulmonary tuberculosis. In persons with little sputum, small amounts may pass over the top of the windpipe and down to the stomach. Sputum may be coughed up naturally, be induced by a special inhalant or be obtained through a stomach washing or aspirations from the air tubes. The bacilli may be found by a rapid microscopic examination called a 'smear'. A more accurate identification is by growing the actual germs. This may take up to 12 weeks and is called a 'culture'.

K What is a tuberculin test?

A tuberculin test is the injection into the skin of a minute dose of some of the proteins (tuberculin) made by the TB germ. Persons who have been infected have formed antibodies that react with the tuberculin to give a positive reaction. The test is also called the Mantoux test.

L Does a positive skin test mean that I have tuberculosis?

No. Most people with a positive test do not have active TB, but have been infected at some time. Usually the body's defences have controlled the infection.

M Can animals cause infection to humans?

TB in Australia is rarely spread between animals and humans by close contact. Bovine TB can only be contracted by drinking unpasteurised milk.

N What symptoms does pulmonary tuberculosis cause?

In the early or even moderate case, there may be no symptoms. The classic symptoms of fully developed disease are cough, sputum, coughing up blood, weight loss, lethargy and high temperature. A persistent cough or any of the other symptoms indicate the need for a chest X-ray.

O What is the treatment?

Modern treatment is by drugs. It is almost always successful but most patients still need six months of medication. Interrupted or too short a period of therapy increases the possibility of treatment failure. The best chance of cure is on the first treatment.

P What drugs are used in treatment?

Many are available, but several that have been proven to be the best are Isoniazid, Rifampicin, Pyrazinamide, Ethambutol and Streptomycin.

Q What can I do to ensure my cure?

Take your drugs absolutely regularly and exactly as prescribed. Never stop taking one of your drugs as treatment problems may result. Consult immediately with your doctor or the supervising nurse about all ill-effects that make taking your drugs difficult. In some cases it may be necessary to vary the medication because of reactions.

R What is a reactivation?

A reactivation is a breakdown of previously treated TB. It is now rare where proper treatment has been completed. However, to guard against its occurrence, the patient should consult the doctor if symptoms reappear.