

Tuberculosis (TB)

This is an infection caused by a bacterium *Mycobacterium tuberculosis*.

Tuberculosis most commonly affects the lungs. In about 30% of cases the disease affects other parts of the body, such as lymph glands, bones or kidneys. Initial infection of the lung usually occurs during childhood and goes unnoticed. However, a few bacteria continue to survive at the site of infection. Later in life, the infection can reactivate and a serious lung infection occurs.

Symptoms may include:

- > tiredness
- > fever
- > night sweats
- > weight loss
- > cough
- > blood-stained sputum
- > chest pain
- > swollen lymph glands.

The diagnosis of tuberculosis is suspected on clinical examination, chest X-ray and by skin testing. The diagnosis is confirmed when *Mycobacterium tuberculosis* is grown from sputum or tissue specimens.

Spread occurs when infected airborne droplets (produced when a person with tuberculosis of the lung coughs or sneezes) are inhaled. Tuberculosis affecting other parts of the body is rarely infectious.

Incubation period

(time between becoming infected and developing symptoms)

Symptoms, if they occur, are present about 4 to 12 weeks after an initial lung infection. The risk of reactivation of the initial lung infection and the development of serious lung infection is greatest within the first year or two after initial infection but some risk persists for life.

Infectious period

(time during which an infected person can infect others)

Young children with an initial infection rarely spread the disease. Adults with reactivation of infection are most infectious when they are coughing and have not yet received treatment or are in the first few weeks of treatment.

Treatment

People with tuberculosis should receive anti-TB drugs under the care of a doctor and/or the Chest Clinic. Completing a full course of therapy (of at least six months) is essential.

Control of spread

- > The Chest Clinic, Royal Adelaide Hospital, is responsible for follow-up and treatment of all cases of tuberculosis in South Australia and should be informed if any person is suspected of having tuberculosis.
- > If a person is found to have tuberculosis, they should be excluded from school or work until treatment has been given and a medical certificate is produced from the appropriate health authority.
- > When a person is diagnosed with TB, the Chest Clinic will perform skin testing of family members and other close contacts and may request skin testing of fellow students or employees (to exclude significant exposure to, and risk of developing, tuberculosis).
- > Health care workers should have a pre-employment health screen, which includes a tuberculin skin test (Mantoux) to detect previous exposure to TB.
- > A vaccine (BCG) is available. The vaccine does not prevent tuberculosis infection but does reduce the risk of death from tuberculosis. In Australia, BCG is recommended for certain people who have a high risk of exposure to tuberculosis, but is not part of routine childhood vaccinations.



Tuberculosis is a notifiable disease

Useful website

- > Chest Clinic, Royal Adelaide Hospital
http://www.rah.sa.gov.au/thoracic/health_programs/TBfactsheets.php