

Tuberculosis

What is tuberculosis?

Tuberculosis (TB) is a bacterial disease that can damage the lungs, or occasionally other parts of the body, such as the lymph nodes (glands), the bones and, rarely, the brain. Infection with TB may not develop into 'active' TB disease. In most healthy people, the body's immune system stops the bacteria from multiplying and they may not even realise they have been infected.

However, not all the bacteria (germs) may be killed but can remain dormant (inactive) for many years. If the body's immune system begins to fail later in life (or when a patient gets another illness or injury) the TB bacteria may begin to multiply again and can cause 'active' TB, which can lead to serious complications and even death, especially if the body is weakened by other health problems.

TB is curable with a full course of antibiotics.

Who is at risk?

Anyone can get TB. However, it is difficult to catch. You are most at risk if someone living in the same house or a close friend has the disease. People with certain medical conditions, those who live in overcrowded or substandard housing or those from some ethnic or social groups can be more at risk of developing TB.

What are the symptoms?

TB develops slowly in the body and it usually takes several months for symptoms to appear.

Any of the following symptoms may suggest TB:

- Fever
- Losing weight
- Weight loss
- Blood in your sputum (phlegm or spit).
- Persistent cough

TB can lie dormant in the lungs for many years and there may be no symptoms. If the infection becomes active, then more TB germs are produced within the body and symptoms develop.

How do you catch it?

The TB bacteria are usually spread through the air. It is caught from another person who has TB of the lung. The germ gets into the air when the person coughs or sneezes.

Only some people with TB in the lung are infectious to other people. Such cases are called “sputum smear positive” (or open). Even then, you need close prolonged contact with these people. These people stop being infectious after a couple of weeks of treatment.

What is the difference between tuberculosis disease and tuberculosis infection?

People who have a weak immune system – they may be elderly, frail or have serious health issues – are likely to develop TB disease if they get infected by TB, as their bodies aren’t able to kill or suppress the bacteria.

People with TB infection (where the infection is inactive) have no symptoms, can’t spread it to others but can develop TB disease in later life.

How is it treated?

Patients with active TB are given a combination of antibiotics. These need to be taken for six months.

How important is treatment?

Treatment is vital. If you have open TB, and if you have been infected with the bacteria (but have not become unwell) you must take the treatment as directed. It is important to complete the full course of treatment as it will stop you from being infectious, and will remove the risk of you developing drug resistant TB (drug resistant TB is very difficult to treat). It should not be forgotten that TB used to kill many people before we had modern treatments.

What if I have contact with someone with TB?

Discuss this with your family doctor (GP). Only close contacts are at risk of contracting TB. Sometimes, a tuberculosis nurse or chest disease health visitor will contact you (they will have a list of close contacts of a person with TB). The nurse or health visitor will arrange any tests that you may require (a skin test or X- ray). This does not mean that you have TB but it is a chance to check for any symptoms.

How do I find out more?

More information is available from your doctor or nurse. Other people that can answer your questions include the Consultant in Communicable Disease Control (CCDC) at the local Health Protection Unit and members of the Infection Control Team at the hospital.

Public Health England

0345 279 9879

Infection Control Team

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