

Tuberculosis (TB)

Tuberculosis, commonly known as TB, is an infectious disease caused by infection with the *Mycobacterium tuberculosis* bacterium. Typically TB affects the lungs but it can also infect any other organ of the body. It is spread from person to person through the air when someone with 'active' TB of the lungs or throat coughs, sings, laughs or sneezes.

TB disease was once the leading cause of death in many Western countries but effective treatment and prevention programs mean it is now uncommon in the Australian-born population.

Not everyone with TB infection develops active TB

Only about ten per cent of people infected with TB develop 'active' TB disease that makes the person sick and causes symptoms. Medications can help reduce the risk of a person with dormant or 'sleeping' TB developing active disease.

How TB is spread

TB is spread when a person with the active disease of the lungs or upper airways coughs, sings, laughs or sneezes. People nearby may breathe in these bacteria and become infected. The bacteria can settle in the lungs and begin to grow. From there, they can move through the blood or lymphatic system to other parts of the body such as the kidney, spine and brain. TB in the lungs or throat can be spread to other people. TB in other parts of the body is usually not infectious.

An infected person who does not have active disease cannot transmit TB to another person. These people have 'sleeping' or latent TB. Only people with 'active' disease of the lungs or upper airways can pass on the infection.

Sometimes a mother who has active TB disease that has not yet been treated can pass the germ to her baby before or during birth (congenital tuberculosis) – however, this is extremely rare. There have been very few reported cases of this in the world.

Active TB disease makes you ill

Some of the symptoms of TB disease include:

- Persistent cough
- Tiredness
- Night sweats
- Weight loss
- Coughing up blood.

Some people are more at risk than others

The number of people who get TB in Victoria is low – about 400 to 450 cases per year. The most common way to catch TB is if you have close contact over a long period of time with somebody who has active disease in the lungs, before they begin treatment.

Some groups at higher risk of developing active TB disease if they have been infected with TB bacteria include:

- Migrants and refugees
- Aboriginal people and Torres Strait Islanders (in northern Australia)
- People living with HIV infection and AIDS

- People with poor immunity
- Alcoholics
- Elderly people
- People living in institutions
- People living in overcrowded conditions
- People with diabetes
- Health professionals.

TB vaccine

The vaccine against TB is called BCG. It is no longer recommended for use in the general population of Victoria, nor is it recommended for healthcare workers. It is only recommended for people at high risk of infection. These people include:

- Aboriginal and Torres Strait Islander babies in high risk regions such as the Northern Territory and Far North Queensland
- Babies born to parents with leprosy (TB and leprosy are caused by similar germs)
- Children under five who go to live in high risk countries for a long time
- Children under 16 who are regularly exposed to someone with active TB and who cannot be given preventative treatment.

Testing for TB is simple

If your doctor thinks you have been infected with the TB germ, a skin test can be done. The tuberculin skin test (Mantoux test) is one of the tests that can show if you are likely to have been infected. A new blood test called Quantiferon TB Gold is now also available. You should be tested if you:

- Are infected with HIV/AIDS
- Live and work in close contact with someone who has recently been diagnosed with active TB of the lungs
- Have any TB symptoms.

Other common tests for TB include:

- A chest x-ray – to show whether TB has affected the lungs
- A sputum test – to see if TB germs are present in coughed-up sputum.

TB treatment

If you have TB infection, your doctor may prescribe a course of tablets or follow up with regular chest x-rays. Active TB disease can be treated with medication, usually at a major public hospital or with a specialist physician. It will take at least six months to cure TB, sometimes longer.

It is very important that you take the full course of treatment. If you don't, TB can return and may be harder to cure because it may become resistant to the medication.

TB medications can cause side effects

The medications can cause side effects including:

- Itchiness
- Upset stomach
- Pins and needles
- Skin rash
- Blurred vision
- Dark urine (orange-red colored urine is a normal side effect and is **not** harmful)
- Yellow eyes.

You should discuss any side effects with your doctor.

Where to get help

- Your doctor
- Communicable Disease Prevention and Control Unit, Department of Health Victoria Tel. 1300 651 160
- National Immunisation Infoline Tel. 1800 671 811

Things to remember

- TB is an uncommon infectious disease in Victoria.
- Only people with active TB of the lungs can pass on infection.
- TB can be treated with medication.

This page has been produced in consultation with, and approved by:

Department of Health - Communicable Disease Prevention and Control Unit

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