



Royal Berkshire
NHS Foundation Trust

Tuberculosis: Pulmonary TB and your treatment

Information for patients

TB Service: 0118 322 6882

Information for people diagnosed with pulmonary TB.

What is tuberculosis (TB)?

TB is an infection caused by bacteria (*Mycobacterium tuberculosis*), that can affect many different parts of the body. It most commonly affects the lungs (pulmonary) and can be infectious. TB can be cured by taking the full course of treatment.

What is pulmonary TB?

- You have been diagnosed with pulmonary TB. This means you could pass the infection on to others.
- TB is spread through the air when people with infectious TB in their lungs cough. If you have this form of TB, people who have had prolonged contact with you could have breathed in the bacteria and become infected.
- You will need to stay away from work and take some precautions, but once you have been on continuous TB treatment for two weeks you should then no longer be infectious and can return to work. Your consultant and TB specialist nurse will discuss this with you in more detail.
- Your TB specialist nurse will also discuss your family and friends with you. This will allow us to decide which of them has had prolonged close contact with you and are more likely to be at risk of infection. We will then arrange to see them to do a simple skin test and, in some cases, have an x-ray taken.

Your treatment

- You will be looked after as an outpatient by a doctor and nurse who specialise in TB, unless you are very unwell and need to be admitted to hospital.
- Treatment for TB is usually six months but this may need to be longer depending on the individual. Your consultant will discuss this with you.

- You should start to feel better within a few weeks of taking your medication. This does not mean that the TB has gone.
- **It is important that you take the full course of your medication for the TB to be cured.**

Important advice

- These tablets may interfere with other medication you take, please check with your TB specialist nurse for advice.
- These tablets will affect the contraceptive pill, for further advice, please see your GP.
- All medication must be taken together by mouth, once a day, on an empty stomach (30 minutes before food).
- Please avoid drinking alcohol.
- Take your medication every day without missing a dose. If you do not take your tablets, any remaining TB bacteria will continue to grow and the TB may become difficult to treat. You could also then become resistant to some of the treatment (multi-drug resistant TB). TB can be cured by taking the full course of treatment.
- Make sure you don't run out of your medication, but if you do, get in contact with your TB specialist nurse as soon as possible.
- Attend all your hospital appointments so that we can monitor your progress and supply you with more medication.
- Store medicines in a cool, dark place, out of the reach of children.
- Please contact us if you want to discuss any part of your treatment.
- Remember to contact us immediately if you have any side effects.
- If you don't get a follow up appointment, contact 0118 322 6882.

To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

RBFT Respiratory Medicine

Reviewed: December 2023. Next review due: December 2025.

Your medication

These are just a few of the possible side effects. Please read the patient information leaflet with each medication for a complete list.

Rifater – Round, light pink tablet. This tablet combines Rifampicin, Isoniazid and Pyrazinamide. For side effects see Rifampicin, Isoniazid and Pyrazinamide.



Rifinah – 300mg orange capsule / 150mg round, bright pink tablet. This tablet combines Rifampicin and Isoniazid. For side effects, see Rifampicin and Isoniazid.



Rifampicin – 300mg red a pink capsule, 150mg red & blue/grey capsule. This will colour urine, tears and sperm orange (this is normal and nothing to worry about). Contact lenses may become discoloured so wearing spectacles is recommended until the treatment has ended. The contraceptive pill will not work effectively so you will need to consider an alternative, barrier method of contraception. Other side effects include skin rashes, vomiting and diarrhoea.



Isoniazid – 100mg round white tablet, 50mg small, round white tablet. Side effects may be nausea, vomiting and tingling in hands and feet. You may be given pyridoxine to prevent the tingling from happening. May affect the contraceptive pill.



Pyrazinamide – 500mg round white tablet. Side effects may be rashes, nausea, vomiting, jaundice, fevers, aches or pains in your joints.



Ethambutol – 400mg round grey tablet, 100mg round yellow tablet. Side effects may be blurred vision and changes in red/green colour vision.



Pyridoxine – 10mg round white tablets. Vitamin B6 supplement for prevention of tingling in feet and hands.



These medicines are processed in the body by the liver. Please contact the TB nurse if you develop abdominal pain, vomiting or become yellow (jaundiced).