



Tuberculosis (TB)

This leaflet is for patients, relatives and visitors and explains what TB is, how it is spread and how it is treated.

What is TB?

Tuberculosis (TB) is a bacterial infection that can affect the lungs or any other part of the body, such as the lymph nodes (glands), bowel, bones and more rarely, the brain. TB can be either latent or active. If latent, the bacteria are present in the body but are kept inactive or dormant by an individual's immune system. However, if the body's immune system begins to fail, due to old age, illness or medication, then TB bacteria may reactivate and cause active TB disease. The person would then develop symptoms and need treatment to get well again. TB is curable for the majority with a full and lengthy course of antibiotics.

Who is at risk?

England is now a low incidence TB country but still had almost 5000 cases notified in 2018. Anyone who has had exposure to TB bacteria can develop TB disease. You are most at risk if you have had close prolonged contact with a person who has TB infection in their lungs. People who have lived in countries where TB is more common are more at risk of developing TB. Having other medical conditions, a history of drug or alcohol abuse or being homeless or in prison also makes a person more susceptible to TB infection.

What are the symptoms?

Only active TB causes symptoms. The bacteria multiply slowly in the body and symptoms may take weeks or months to develop.

Any of the following symptoms may suggest TB:

- Fever
- Drenching night sweats
- Weight loss
- Persistent cough for longer than 3 weeks
- Blood in your sputum (phlegm or spit)
- Swollen glands, especially in neck

How do you catch it?

The TB bacteria are usually spread through the air. It is caught from a person who has untreated TB in the lungs or respiratory system. The bacteria get into the air when the person coughs or sneezes. People usually stop being infectious after two weeks of effective treatment.

Compassionate	Aspirational	Resourceful	Excellent

What is the difference between latent and active TB?

- Latent infection: No symptoms, well, not infectious, treatment is optional.
- Active infection: Symptoms, unwell, may be infectious, treatment needed.

How is active TB treated?

A combination of up to four antibiotics are taken daily for at least six months. Treatment is free and does not affect a person's right to be in the country. Most people continue to work once they are no longer infectious. The drugs have numerous side effects but support will be given by the TB team.

How important is treatment?

It is very important to complete the full course of treatment to ensure all the bacteria are killed. This will also remove the risk of developing drug resistant TB which is much harder to treat.

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. A TB specialist nurse will contact you to arrange screening, if it is believed that you are at risk. The nurse will arrange any tests that you may require and check for symptoms. Tests may include a skin test, blood test or chest X- ray. The screening looks to detect both latent and active TB.

Questions and concerns

If you have any questions or concerns about TB, please ask your nurse for further information or you can contact the Royal Berkshire NHS Foundation Trust Infection Control team on 0118 322 6914, email: infection.control@royalberkshire.nhs.uk.

How do I find out more?

Hospital TB Team: 0118 322 6882 TB Alert website https://www.tbalert.org/ https://www.nhs.uk/conditions/tuberculosis-tb/

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

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

Simon Wells, RBFT Infection Prevention & Control, November 2024 Next review due: November 2026

Resourceful