WHAT IS TUBERCULOSIS?
Tuberculosis (also known as TB) is an infectious disease that usually affects the lungs. TB can also affect other parts of the body such as the brain, kidneys or spine. Some people with active TB disease may have only mild symptoms.

WHAT ARE THE SYMPTOMS?
People with TB may have some or all of the following symptoms:

- A cough that lasts for more than three weeks sometimes with blood stained sputum
- Fevers
- Unexplained weight loss
- Night sweats
- Always feeling tired
- Loss of appetite
- Pain and/or swelling in the affected area when TB is outside the lungs.

HOW IS IT SPREAD?
TB is spread through the air when a person with TB in the lungs or throat coughs, sneezes or speaks. When other people breathe in these germs they can become infected. Most people get TB germs from someone they spend a lot of time with, like a family member or friend. TB is **NOT** spread by household items (for example by cutlery, crockery, drinking glasses, sheets, clothes or telephone) so it is not necessary to use separate household items.

WHO IS AT RISK FROM TUBERCULOSIS INFECTIONS?
People most at risk of TB are those who have spent long periods of time in close contact with a person who has TB of their lungs or respiratory tract or people who:

- Have cancer, including lymphoma or Hodgkin's disease
- Take medication that affects their immune system e.g. chemotherapy, steroids
- Have HIV / AIDS
- Have a chronic illness that affects their immune system

HOW is TB TREATED?
If you are very ill TB treatment is begun in hospital. In order to prevent infection in others, isolation will be required until you are no longer contagious. This means that:

- Anti TB drugs will be given for 6 to 12 months. You may have to take as many as five different anti TB drugs and some vitamins
- You will be observed taking the drugs to check for side effects and to make sure the treatment is completed.

HOW IS IT PREVENTED?
- People with TB in their lungs are instructed to cover their nose and mouth when they cough or sneeze
- People with infectious TB in their lung are isolated until they are no longer infectious
- BCG vaccination gives protection against life-threatening forms of TB to young children who travel to countries where TB is very common. BCG is not generally recommended in NSW.

HOW IS IT DIAGNOSED?
For TB in the lungs:

- A chest x-ray can show whether TB has affected the lungs
- A sputum test shows if TB germs are present in coughed up sputum
- If the person cannot cough up sputum other tests may be needed

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Editor: Jayne O’Connor. January 2014 revised after comment. Infection Prevention & Control department, Adventist healthcare Ltd.
This information leaflet provides basic information only and is to be as a guide, not as a complete resource on the subject.
HOW WILL MY CARE CHANGE WHILST IN HOSPITAL?

- You will be placed in a private room, the door must be kept closed at all times.
- A sign is placed outside your door to alert hospital staff to use special protective infection control precautions when entering the room.
- Visitors must contact nursing staff before entering the room.
- To prevent further spread of the infection you are required to remain in your room during the infectious stage.
- If you are required to have urgent medical tests elsewhere in the hospital you will be supplied with a special face mask to wear over your nose and mouth, at all times, when you are outside your room.
- Your Doctor may allow you to be treated at home with support of the chest clinic nurses in your area. If home isolation is required, you will be given specific instructions for this.
- On discharge from hospital you will be referred to a Public Health Chest Clinic for follow up treatment and monitoring.
- During your infectious period if you need to attend a hospital emergency department or your GP, notify the receptionist of your infectious status on arrival, ask the receptionist to supply you with a face mask and sit away from other people.

GOOD HAND HYGIENE PRACTICES

Hand Hygiene is the most effective way to prevent ALL infections. Encourage your family and friends to learn and maintain good hand hygiene practices every day. Please refer to the hand hygiene information in the patient information booklet or hand hygiene leaflet available from the Infection prevention and control team.

During your stay in hospital you may have seen the staff using an alcohol-based hand rub, as an alternative to soap and water. Alcohol-based hand rubs or gels can be used for hand hygiene as long as your hands are not visibly soiled / dirty. There are a variety of brands on the market and are available for purchase at most pharmacies. You may choose to use this type of product at home.

CAN I STILL HAVE VISITORS?

Yes – But visitors who SHOULD NOT come to see you are those people who may have a lowered immunity, young children and babies and pregnant women. If you are unsure about having contact with your family and friends during your infectious stage, please speak to your doctor or ask to speak with the infection control nurse.

Whilst you are infectious, ALL your visitors will be required to wear a mask to protect them from infection; they may also be required to wear gloves and an apron if they are assisting you with care. The nursing staff will direct your visitors in applying these items and in the correct disposal of them as well as educate them on the need to perform hand hygiene before entering your room and when they leave your room. We would appreciate it if you would also encourage your visitors to wear a mask and perform hand hygiene.

WHERE CAN I GET FURTHER INFORMATION?

You can talk to your doctor or the nursing staff or contact a public health chest clinic. If you wish to speak with the Infection Control Department ask your nurse to contact us. Our office hours are 8am to 4pm Monday to Friday. Our office number ext. 9433 or 9732

Or


REFERENCES

Australian Govt. Dept. of Health and Aging, Infection Control Guidelines.2013
NSW Dept. of Health, Infection Control Policy, PD 2007_036
last accessed 11-09-13