

Medications?

Active TB is treated by taking several anti-TB medicines for 6 –9 months. If drugs are stopped before completion, the infected person may become sick again. If the drugs are not taken correctly, the bacterium can develop resistance. Resistant TB is harder and more expensive to treat, and can take up to 18-24 months to complete the course. First line anti-TB medications include isoniazid, rifampin, ethambutol, and pyrazinamide. The treatment for latent TB is easier, due to having less bacteria. There are 4 regimens for treatment. Approved medications are isoniazid, rifampin, and rifapentine.

Possible side effects include fever, unexplained anorexia, dark urine (color of coffee or cola), icterus, rash, persistent paresthesia of hands and feet, persistent fatigue or weakness lasting 3 or more days, abdominal tenderness (especially in right upper quadrant), easy bruising or bleeding, arthralgia, nausea, and vomiting. Some of the drugs can interact with other drugs (including hormonal contraceptives)

Wetmore Clinic

Offers onsite blood work, chest x-ray, medical evaluation by TB experts, and free TB medications.

Tuberculosis (TB) Disease: Only the Tip of the Iceberg

There are **two** types of TB conditions: **TB disease** and **latent TB infection**.

People with **TB disease** are sick from active TB germs. They usually have symptoms and may spread TB germs to others.

People with **latent TB infection** do not feel sick, do not have symptoms, and cannot spread TB germs to others.

But, if their TB germs become active, they can develop **TB disease**.

Millions of people in the U.S. have **latent TB infection**. Without treatment, they are at risk for developing **TB disease**.

To learn more about TB, visit www.cdc.gov/tb

U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

<http://www.cdc.gov/tb/images/infographic.jpg>

www.medschool.lsuhsu.edu/tb/
dhh.louisiana.gov/index.cfm/page/1005
www.cdc.gov/tb/

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Tuberculosis (TB)

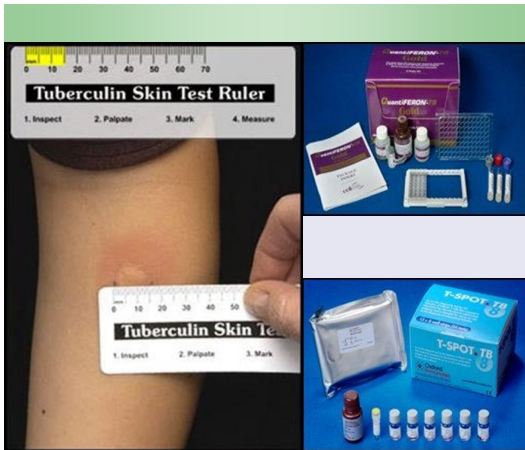


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www.cdc.gov/tb/

What is TB?

TB is caused by *Mycobacterium tuberculosis*, a bacteria that is spread from person to person through the air. The bacterium is introduced into the air when an infected individual coughs, sneezes, speaks, or sings; which can then be breathed in by nearby people. The disease cannot be spread by shaking hands, sharing food and drinks, kissing, touching bed linens or toilet seats, and sharing toothbrushes. TB can be a fatal disease, if left untreated. Usually the bacteria will attack the lungs, but can attack any part of the body, such as the kidney, spine, and brain. TB infections can take on two forms; latent TB infection and TB disease.

- ◆ In 2013, total of 9582 cases of TB reported in the United States.
- ◆ One third of the world's population is infected with TB
- ◆ In 2014, 9.6 million people worldwide became sick with TB disease, with 1.5 million TB-related deaths.

What is active TB?

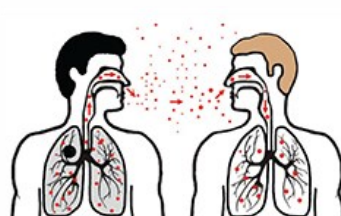
Active TB or TB disease is when the bacterium become active in the body and multiply. This occurs when the immune system cannot stop the bacteria from growing. The person will get sick and have symptoms of TB. People with TB disease can spread the bacteria to other people. Note that not everyone with latent TB will develop TB disease, some people get active TB soon after getting infected (within weeks), while in others it could take years. People with active TB will test positive for TB infection. They must be given medicine to treat TB disease. People with weakened immune systems have a greater risk of developing TB disease.

What is latent TB?

Latent TB is when the TB bacteria live in the body, but doesn't make you sick. Most healthy people who get infected are able to fight the bacteria to prevent it from growing. Persons with latent TB do not feel sick and do not have any symptoms. These people will have a positive TB test. However, they are not infectious and cannot spread TB to other people. They can progress into active TB disease, but they are often given medicine to prevent them from developing TB disease.

In the United States there is estimated that more than 11 million people have latent TB (4% of the population). About 5-10% of infected will develop into active TB if

left untreated (about 550,000-1,100,000 people).



www.cdc.gov/tb/

How do we screen for it?

When there are no symptoms of TB, usually the only sign is a positive reaction to a TB skin test or a positive TB blood test.

The TB skin test (also known as Mantoux test, PPD test, tuberculin skin test) is considered to be safe in children, and is preferred over TB blood tests for children less than 5 years of age. This is when a small needle is used to place some testing material (tuberculin) under the skin. A health care worker will check to see if there is a reaction to the test when you return 2-3 days later.

The TB blood test measures how a person's immune system reacts to the germs that cause TB. The United States Food and Drug Administration (FDA) has approved two Interferon-Gamma Release Assays (IGRAs), which are blood tests, QuantiFERON® (TB Gold In-Tube test, QFT-GIT) and T-Spot® TB test.

Anybody with a positive test for TB, symptoms of TB, or a history of contact with a person with infectious TB disease should get a medical evaluation. Which include a chest x-ray and physical examination to exclude TB disease (must be done before starting treatment for latent TB infection).

Risk factors for development and progression of latent TB infection and TB disease:

- ◆ Children < 4 years of age
- ◆ Close contact with an adult with active TB
- ◆ Immunocompromised status (due to HIV, chronic steroid use, cancer, malnutrition, chronic renal failure, diabetes mellitus)
- ◆ Recent travel to a TB endemic area
- ◆ Recent immigrant (< 5 years) from highly prevalent area
- ◆ Not correctly treated for TB in past
- ◆ Homelessness, exposure to shelters, jails, or hospitals
- ◆ Substance abuse
- ◆ Residence in a congregate settings such as group homes