Tuberculosis
TB – the disease, its treatment and prevention

immunisation
the safest way to protect your health

NHS
TUBERCULOSIS
TB (tuberculosis) is an infectious disease that usually affects the lungs, although it can affect any part of the body.

About 150 years ago, it caused about one in eight of all deaths in the UK, but by the 1980s, with better housing and nutrition and effective treatments, it had become uncommon in the UK with 5745 cases in 1987.

However, TB had not been wiped out completely. Over the last 20 years numbers in the UK have been rising slowly. About 7000 people now get TB each year – just over one person in every 10,000 of the population.

TB is not easily caught – you have to be in close and lengthy contact with someone with TB (for example, living in the same household) – but everybody should be aware of the symptoms of the disease so they can seek treatment as soon as possible.

TB is curable with a course of special antibiotics.
How is TB spread and am I likely to get infected?

TB can only be caught directly from someone with infectious TB in their lungs or throat. Although TB is spread through the air when people who have the disease cough or sneeze, it takes close and lengthy contact with an infectious person to catch the disease. So it’s unlikely that you’ll catch TB on the bus or tube, for example.

Not everyone with TB of the lungs is infectious, and as long as they are taking the proper treatment most people that were infectious become non-infectious pretty quickly — generally after about two weeks — as long as they are taking the proper treatment.

While anyone can catch TB, some groups of people are more at risk than others. These include people who:

- have lived in the same household — or been in close and lengthy contact — with someone with infectious TB
• are living in unhealthy or overcrowded conditions, including those who are homeless or sleeping rough

• have lived, worked or stayed for a long time in a country with a high rate of TB, such as south-east Asia, sub-Saharan Africa and some countries in eastern Europe

• may have been exposed to TB in their youth when the disease was more common in this country

• are the children of parents whose country of origin has a high rate of TB

• have been in prison

• are unable to fight off infection (immunosuppressed) due to illness (e.g. HIV infection) or treatment

• are addicted to drugs or misuse alcohol

• do not eat enough to stay healthy.
How will I know if I’ve got TB?

The most common symptoms of TB include:

- a persistent cough that gets progressively worse over several weeks
- loss of weight for no obvious reason
- fever and heavy night sweats
- a general and unusual sense of tiredness and being unwell
- coughing up blood.

All these may also be signs of other problems but if you have them and are worried, talk to a doctor or nurse at your local surgery or clinic, or go to an NHS walk-in centre or phone NHS Direct on 0845 4647.

(For patients' safety, all calls to NHS Direct are recorded. Calls are charged at the same rate as local calls.)

If you are a close contact of someone who has been diagnosed with TB and
there is a risk you may have the infection, you will be offered a check-up at a special TB clinic.

If I have TB, can I be cured?

Yes, TB can be treated with special antibiotics. Once treatment starts, you will begin to feel better after about two to four weeks. But the treatment has to continue for at least six months. It is vitally important to complete the whole course of antibiotics to cure the TB. If you don’t, the TB may return in a form that is resistant to the usual drugs and much more difficult to treat. And you may pass on this more serious form of the infection to your family and friends.

If TB is not treated properly, it may lead to death.