Indiana State Department of Health | Epidemiology Resource Center

Quick Facts

About… *Tuberculosis*

What is tuberculosis (TB)?

TB is a disease caused by bacteria that are spread from person to person through the air. Although TB usually affects the lungs, it can also affect other parts of the body, e.g., kidney, spine, and brain. Without proper treatment, TB can be fatal.

How is it spread?

People with active TB disease of the lungs or throat can release TB bacteria into the air when they cough, sneeze, speak, or sing. These bacteria can stay in the air for several hours. Persons who breathe in the air that contains these TB bacteria can become infected if the bacteria reach their lungs.

What is TB infection?

People with latent TB infection (LTBI) have TB bacteria in their bodies; however because the bacteria are not active, they are not sick. People with LTBI have no symptoms of active TB disease, and they cannot spread the bacteria to others. However, they may develop active TB disease in the future. Individuals with LTBI are often prescribed treatment to help prevent them from developing active TB disease.

What is active TB disease?

People with active TB disease are sick, because TB bacteria are multiplying and destroying tissue in their bodies. They usually have symptoms of TB disease, and people with active TB disease of the lungs or throat can spread the bacteria to others. They are prescribed drugs that can cure TB disease.

What are the symptoms of TB?

The symptoms of active TB disease of the lungs include:

- a bad cough that lasts 3 weeks or longer
- pain in the chest
- coughing up blood
- weight loss
- sweating at night
- weakness or fatigue
- fever
- chills

Who is at risk for TB?

People with active TB disease are most likely to spread the germs to people they spend time with every day, such as family members or coworkers. *If you have been around someone who has active TB disease, see your health care provider right away.* Some people are more likely than others to develop active TB disease once they have been infected, e.g., children under five, people with HIV infection, immunocompromised persons, people who were recently exposed to someone with active TB disease, and people with certain medical conditions.

How will I know if I have TB?

See your health care provider. There are two tests that can help detect TB infection. The Mantoux tuberculin skin test (TST) is performed by injecting a small amount of fluid (called tuberculin) into the skin in the forearm. A person given the TST must return within 48-72 hours to have a trained health care worker check the injection site for a reaction to the tuberculin. A second type of test is the Interferon Gamma Release Assay (IGRA). QuantiFERON®-TB Gold In-Tube and T-spot are two IGRA blood tests that measures how the patient's immune system reacts to the bacteria that cause TB. A positive TST or IGRA test only shows that a person has been infected with TB germs. It does not show whether or not the person has developed active TB disease. Other tests, such as a chest x-ray and a sputum sample, are needed to determine whether the person has active TB disease.

How can TB be treated?

Active TB disease can be cured by taking several drugs for 6-12 months. It is vital that people who have active TB disease take all of the medicine exactly as prescribed. If they stop taking the drugs too soon, they can become sick again. If they do not take the drugs exactly as prescribed, the bacteria that are still alive may become resistant to those drugs. TB that is resistant to drugs is harder and more expensive to treat. Therefore, directly observed therapy (DOT) – when a health care worker watches the TB patient take their medications is medical standard of care in Indiana. DOT helps the patient complete treatment in the least amount of time by ensuring that the patient takes the medicines properly.

How can I keep from getting TB?

Avoid close contact or spending prolonged time with known TB patients in crowded, enclosed environments, e.g., clinics, hospitals, prisons, or homeless shelters.

Treatment of LTBI is essential to controlling and eliminating TB in the United States. Treatment of LTBI substantially reduces the risk that TB infection will progress to active TB disease. Certain groups are at very high risk of developing active TB disease once infected, and every effort should be made to begin appropriate treatment and to ensure those persons complete the entire course of treatment for LTBI.

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All information presented is intended for public use. For more information, please refer to the Centers for Disease Control and Prevention Web site: http://www.cdc.gov/tb/faqs/default.htm