

FACTSHEET



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Tuberculosis (TB)

What is tuberculosis?

Tuberculosis or TB is caused by a bacterium called *Mycobacterium tuberculosis*. Many people in the world have been infected with *Mycobacterium tuberculosis*. This is called latent TB infection (latent means hidden), but only a few become unwell with TB disease.

How is TB caught?

The most common way of catching the infection is through close contact with an adult who has TB of the lungs (pulmonary TB) and is coughing.

Children with TB rarely spread the bacterium to other children or to adults.

There is very little TB in Australia and it is usually caught overseas, by travel to or being born in a place where TB is common. Occasionally TB is caught in Australia, but mostly from someone who has been overseas.

What happens if children catch TB?

Some children can catch TB infection but stay completely well (asymptomatic). This is called latent TB infection (latent means hidden). Some children become unwell, but disease may take months or years to develop. It is only the children who become unwell with TB that have active TB disease. Young children are at high risk to develop TB disease, most commonly within a few months after TB exposure/infection.

TB disease usually involves the lungs (pulmonary TB) or the lymph nodes in the chest, which can be seen on a chest x-ray. However, TB can affect any organ in the body and other common sites include the lymph nodes in

the neck (TB cervical lymph-adenitis), the bones (TB osteomyelitis), or most severely the membranes around the brain (TB meningitis).

Children with TB disease may have a persistent cough, fever, tiredness, night sweats, weight loss or more specific symptoms related to the site of infection. TB often comes on gradually, with children slowly becoming ill over weeks or months.

Can TB be treated?

Yes. We have good medicine to treat TB. For children with active TB disease it is usual to start with 3 or 4 TB drugs, given by mouth. The treatment is free, but it is very important that daily treatment must be continued for at least 6 months.

Children receiving TB treatment usually recover completely and have no long-term problems. TB meningitis is a very serious disease and although it can be cured children may have permanent brain damage.

Because latent TB infection can progress to TB disease we prefer to treat young children with latent TB infection using one or two TB drugs for 3-6 months.

What is directly observed treatment (DOT)?

Directly Observed Treatment (DOT) is the way that TB disease is treated in Australia and around the world. Because it is so important that children take all their TB medicine, a nurse from the TB clinic (Chest Clinic) must see your child taking their medicine regularly. DOT is considered essential for all children with TB disease.

What is screening?

When someone is found to have TB, it is important to screen (test) people in close contact for disease and infection. Screening for infection is usually with a special skin test (the tuberculin skin test or Mantoux test) and a chest x-ray, but may include a blood test.

Does the school need to know?

Families of children with TB have a right to privacy. It is not necessary for you to let the school know that your child has TB. The Chest Clinic will manage any contact tracing in the school without affecting your privacy. If you choose to tell the school or any other person that your child has TB, it is important that you discuss this with a TB specialist. Luckily children are rarely infectious to other people and having TB is nothing to be ashamed of.