

How do I prevent myself from spreading TB germs when I return home?

During this period of treatment:

- It is important that you take your medication regularly.
- Avoid going to crowded places.
- Always cough and sneeze into tissue and throw used tissues properly into a rubbish bin. Wash your hand with soap and water thereafter.
- If any household surfaces is contaminated with your phlegm, it should be cleaned with disinfectant.
- You are advised to have a separate set of utensils during the initial 2 weeks of TB treatment.
- Masks are not necessary for you or for anyone who visits your home.

What will happen to my family and close friends who are exposed?

Your close contacts (i.e. family, office colleagues) will receive a letter from TB Control Unit (TBCU) informing them to go for screening at TBCU @ Moulmein Road. It is advisable that they are screened for evidence of infection and they may need to take anti-TB drugs to prevent themselves from developing active TB.

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For appointments and enquiries,
please call the CGH Appointment Centre at
Tel: (65) 6850 3333

CGH Appointment Centre operating hours:

8.30 am to 8.00 pm (Monday to Friday)
8.30 am to 12.30 pm (Saturday & Sunday)
Closed on Public Holidays

For more information, please visit
<http://www.cgh.com.sg>



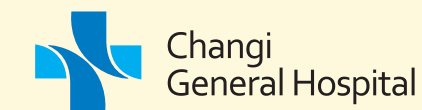
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Tuberculosis



What is Tuberculosis (TB)?

TB is an infectious disease caused by a germ called Mycobacterium tuberculosis. It most commonly affects the lung, although the germ can affect almost any tissue or organ in the body.

Is everyone who is exposed to TB infectious?

No. Not everyone who is exposed to TB develop illness. Usually the body is able to fight the germs to stop them from growing and causing them to be inactive. The germs remain alive in the body and may become active later. This is called latent TB infection.

People with latent TB infection:

- have no symptoms
- cannot spread TB to others
- may develop active TB disease later

However, if a person's immune system is weakened, the chance of developing active TB disease is higher. People who have underlying conditions such as diabetes, HIV infection, cancers and kidney disease are at greater risk. A person with TB disease has active germs plus signs of illness.

Some of the symptoms of TB include:

- fever
- cough lasting longer than 3 weeks
- coughing out blood
- night sweats
- loss of weight



How is TB diagnosed?

The common tests for TB are:

- A chest X-ray which can show whether TB has damaged the lungs
- A Tuberculin Skin Test (Mantoux test) which shows if a person is likely to be infected with TB
- A sputum test for smear and culture of TB germs

How is TB spread?

TB is spread through the air when a person, who is infected with TB in their lungs, coughs or sneezes. People who have close day to day contact with an infected person (include household members, office colleagues or classmates) are at risk of being infected.

There is minimal risk from occasional contact and virtually no risk from single contact with an infected person. TB affecting other organs is usually not infectious, as the germs are not spread into the air.

Can TB be treated?

Yes. TB is treatable with anti-TB drugs. Treatment usually involves a combination of drugs for at least 6 to 9 months. It is important that patient with TB disease completes the entire course of anti-TB drugs even if the symptoms of disease resolve and he / she starts to improve.

Patient who fail to complete or comply with standard treatment may not be cured. The TB germ in the body may develop resistance to the drugs, which will make it more difficult to treat.



What precautions are taken to prevent the spread of TB in hospital?

If you are diagnosed with active TB in the lungs and require hospitalisation, you will be nursed in a single room. Staff will wear protective masks when attending to you. You must stay in the room so that you will not spread TB germ to others. You need to wear a mask if you are transported outside the room for X-rays or any other procedures.

Once you are started on anti-TB drugs, the number of TB germs will gradually decrease.

Can I still have visitors?

Yes, you are allowed to have visitors. Your visitors need to wear a mask to protect themselves before going into your room. Their hands should be washed with soap and water before entering and leaving the room.

However, children under 12 years old or visitors with low immunity are advised not to visit you while you are hospitalised for TB infection.

