Get tested and treated for tuberculosis at MCHD’s TB Clinic

MORGANTOWN, WV (March 22, 2018) — Tuberculosis, consumption, Pott’s Disease and TB are all names for a bacterial infection that has plagued humankind for thousands of years.

Treated at one time by isolation and quarantine, and then by surgery, this disease was only found to be caused by bacteria in 1822. A cure with antibiotics was not developed until 1950.

Saturday, March 24, is World TB Day, which is a good time to look at the history of tuberculosis, progress that has been made and the fight that lies ahead.

Monongalia County Health Department is involved in that fight through its TB Clinic. Patients can be tested and meet with a public health nurse who can diagnose, manage and treat the disease.

TB passes from human to human as an airborne disease via activities including coughing and sneezing. The disease often can be found in the lungs of infected individuals, but also can travel to the kidneys, brain tissue, spine and lymph nodes. Individuals with active TB in their lungs have this bacteria in their sputum, which resulted in the enactment of public health laws to prevent people from spitting on sidewalks.

In the 20th century, TB was the leading cause of death in the United States. West Virginia typically has around 15 TB cases annually compared to almost 10,000 cases nationally. It’s been on the rise since 2000. Outside the U.S., TB is still seen frequently in developing countries.

According to the World Health Organization (WHO), TB causes approximately 1.5 million deaths annually in spite of the fact that there is a cure. This is attributed to the
slow growth of the disease, the lack of symptoms early on and the large combination of medications required to be taken during many weeks of therapy. Failure to complete an entire series of medication has led to emerging, multi-drug resistance, making TB even more challenging to treat.

People become exposed to TB by breathing in bacteria from an infected individual, but those bacteria do not survive on surfaces, so the disease is not transmitted that way. Ninety percent of those who have been exposed to TB do not develop symptoms. Detection is made by a skin test or a blood test, if necessary followed by a chest X-ray and/or a test of sputum from the lungs.

Someone who tests positive for TB without showing symptoms has latent TB, which can be treated with several antibiotics for up to six months. These individuals are not considered infectious. They will always test positive for TB, however.

Those infected with latent TB who did not receive treatment or who did not complete the entire course of antibiotics may go on to develop active TB. Symptoms can be vague and include fatigue, diminished appetite, weight loss, fever, chills, night sweats and, for those with very advanced lung infection, coughing up blood. Active TB also can be treated with multiple medications administered over a long period of time.

TB remains common in poverty-stricken areas, especially when combined with conditions such as poor nutrition and overcrowding. Other high-risk groups include those incarcerated in prisons, alcoholics, cigarette smokers and intravenous drug users, as well as people with compromised immune systems because of diseases such as HIV, conditions such as diabetes, COPD, kidney disease and cancer or because of chemotherapy, radiation or steroids.

For more information on TB, check out Centers for Disease Control’s website at cdc.gov/tb or call the West Virginia Division of Tuberculosis Elimination at 304-558-3669. Dr. Lee B. Smith, MCHD executive director and county health officer, is a member of the West Virginia TB Advisory Committee. To make an appointment to be seen at MCHD’s TB Clinic, call 304-598-5119.

For more information on MCHD, check out monchd.org and follow us on Facebook and Twitter @wvmchd for up-to-date information on health and safety.

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