

Tuberculosis

Why is tuberculosis important?



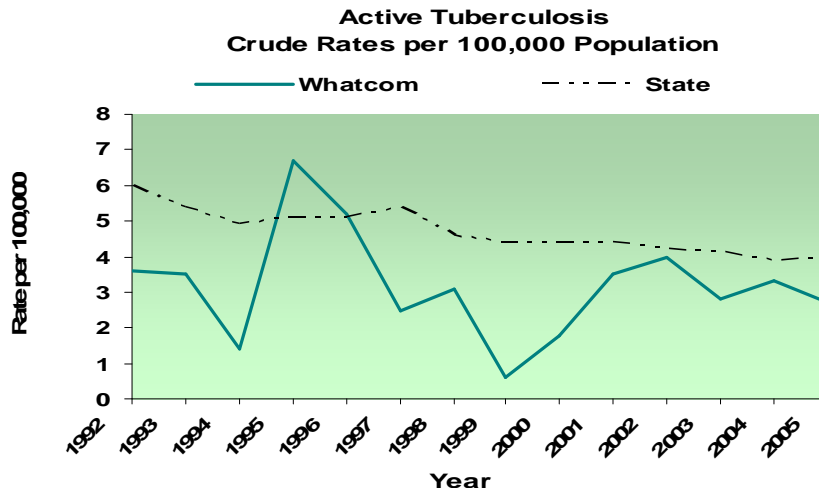
Tuberculosis (TB) is a disease that usually affects the lungs and sometimes affects the brain, kidneys, or spine. In the United States, TB is most commonly caused by the acid-fast bacillus *Mycobacterium tuberculosis*. Like the common cold, it spreads through the air. Only people who are sick with TB in their lungs are infectious. This is called **active TB**. When someone with active TB coughs, sneezes, talks or spits, he/she propels TB germs, known as bacilli, into the air. Left untreated, each person with active TB could infect friends, family, and other close contacts. However, people infected with TB bacilli do not necessarily become sick with the disease. The immune system is capable of “walling off” the TB bacilli so that they can lie dormant for years. This is called **latent TB**. When an infected person’s immune system is weakened, the chances of becoming sick are greater.

The global incidence of TB is 140 cases per 100,000 population. The highest incidence is in Africa at 356 cases per 100,000 and the lowest incidence is in The Americas at 41 cases per 100,000. Although drug therapies have been used to treat TB for about 50 years, new drug-resistant strains of TB have been documented by the World Health Organization in every country they surveyed.

How are we doing?



Tuberculosis is an immediately notifiable condition in Washington State. A statewide increase in cases from 1987-1991 resulted from the following factors: (1) increasing numbers of immigrants from countries with high rates of TB; (2) TB cases associated with the HIV epidemic; and (3) outbreaks of TB in confined settings—correctional and healthcare facilities, homeless shelters, etc. The following chart and table provide crude incidence rates per 100,000 population for Whatcom County and Washington State from 1992 through 2005. The table also provides case numbers.



**Active Tuberculosis
Crude Rates & Cases
per 100,000 Population**

Year	Whatcom County		Washington State	
	Rate per 100,000 Population	# of Cases	Rate per 100,000 Population	# of Cases
1992	3.6	5	6.0	306
1993	3.5	5	5.4	286
1994	1.4	2	4.9	264
1995	6.7	10	5.1	278
1996	5.2	8	5.1	285
1997	2.5	4	5.4	305
1998	3.1	5	4.6	265
1999	0.6	1	4.4	258
2000	1.8	3	4.4	258
2001	3.5	6	4.4	261
2002	4.0	7	4.2	252
2003	2.8	5	4.1	250
2004	3.3	6	3.9	245
2005	2.7	5	4.0	256

Except for 1995 and 1996, Whatcom County tuberculosis rates have been lower than Washington state rates. Since 2002, there has been a slight downward trend in both county and state data. In 2005, the Whatcom incidence rate was 2.7 and the State rate 4.0 per 100,000 population.

What remains to be done?

The Health Department investigates and treats known cases of active TB. The investigation involves contacting identified contacts to be tested for the TB bacteria. Individuals who test positive for TB infection are treated to prevent further active cases and spread of the disease.

The following guidelines can help prevent the further spread of TB:

***PREVENTION
GUIDELINES***

- ❖ If someone has a combination of the following symptoms, he/she should be seen by a doctor and have a TB skin test done:
 1. A cough lasting three weeks or more.
 2. Coughing up blood
 3. Weight loss
 4. Drenching night sweats
 5. Excessive tiredness
- ❖ If someone is coughing near you, ask them to please cover his/her mouth with a tissue; increasing room air circulation is also effective.