

I have TUBERCULOSIS (TB)





I'm told I might have Tuberculosis. What is Tuberculosis?

Tuberculosis is an infectious disease and not a hereditary disease or a curse of God. Any person can get TB. The good news is that it can be cured allowing you and your family to continue with a happy life. The most important thing is to be aware of the symptoms and whether any of these symptoms persist beyond two weeks.

The common symptoms of TB are:

- Cough for more than two weeks (most important)
- Fever, especially that rises in the evening (night sweats)
- Pain in the chest
- Breathlessness or difficulty breathing
- Weight loss
- Coughing of blood/blood in sputum
- Loss of appetite

Who is susceptible? How does TB spread?

Anyone can get TB, a bacterium that is transmitted from person to person through air. TB does not see the boundaries of cast or creed. It makes no difference if you are rich or poor, obese or thin, you have the same risk of contracting TB. Everyone is at risk.

What should I do now?

Don't despair. Tuberculosis is curable. Tell a trusted friend, your supervisor, or the company doctor.

If I have TB how can I prevent others close to me from getting it?

- Take your treatment as prescribed by your health worker and complete the full course of treatment
- Always cover your mouth and nose while coughing and sneezing
- Do not spit indiscriminately
- At home you should spit in a box covered by lid and dispose the box by burning it



It is very important not to get scared or to hide the disease whenever someone develops the symptoms of TB.

How can I make sure my treatment is successful?

Due to the fact that TB treatment is a long process, it is emotionally challenging and you may tend to lose hope. For that reason, it is important that from the onset you identify someone who you trust and believe in who can help you to complete the treatment. The National TB Control Programme encourages the participation of a Directly Observed Treatment (DOT) supporter. DOT supporters can be any of the following:

- Health care worker
- Community health worker
- Employer/employee
- Teacher
- Relative
- Or anyone responsible

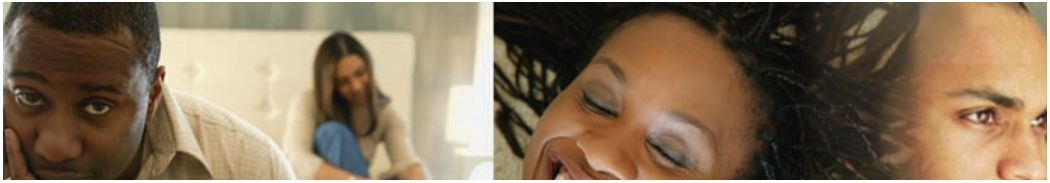
A DOT supporter is not there to police you but to support you.

How long will the treatment take?

Treatment of TB may take six to eight months (and sometimes more) of regular intake of a combination of four to five powerful anti-TB drugs. Whether you take the drugs regularly or not will depend on how serious you are about curing your illness. If you do not take the drugs as prescribed, your illness will worsen. You could also infect members of your family or co-workers. If you fail to follow the prescribed treatment, it is also possible that the usual drugs will no longer work as you may develop a resistance to them. This is most dangerous.

Will I have to go to hospital or stop working?

Treatment of TB does not normally entail hospitalization or long term absence from work, although you might not be able to work in the first two-three weeks of starting your TB treatment. Treatment of TB does mean adhering to a strict discipline in taking all medicines regularly and without fail. There are no short-cuts to therapy, however well you



may feel after you have taken a few days of treatment. With timely diagnosis and regular and complete treatment, you can remain healthy and needn't lose work days or income.

What Shall I eat?

While being treated for TB, you can eat any type of healthy food you choose. A good diet can help you recover strength and energy quickly.

What are the things I should avoid?

A patient with TB should avoid the consumption of cigarettes, tobacco, alcohol, or any other intoxicating drug. There is no reason to stop your sexual life or sharing food or cutlery with friends and family members.

Also remember your duty does not end merely in making yourself well again. If there are others in your family or community who need treatment, help them get it.

Points to remember:

- Report to your supervisor if you have a persistent cough for two weeks or more.

For more information contact:

- Your local health department
- URC at TBinfo@urc-sa.com
- The National TB Control Programme at (012) 312 0106

This workplace information sheet, supported by TASC II TB project of URC through funding from USAID, is adapted from the World Economic Forum Workplace Resources.



Workers in environments with a high risk for TB transmission should receive enhanced and more frequent education concerning:

- the signs and symptoms of TB disease;
- transmission of TB disease; and

Workers in High-Risk environments

The level and detail of any employee's initial TB education session should not be discriminatory based on staff members' level and job responsibilities. The following components of TB education should be included for all workers, regardless of their position:

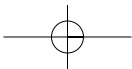
- the basic concepts of tuberculosis transmission, signs, symptoms, diagnosis, and prevention;
- provision of basic information regarding the importance of following up on workers demonstrating signs or symptoms of TB disease;
- need for initiation of precautions of workers with suspected or confirmed TB disease;
- discussion of basic principles of treatment for TB disease;
- discussion against discrimination of those with TB; and
- discussion regarding TB disease among those who are HIV positive

Initial TB Education for workers

Once educated, workers should recognize and be able to respond appropriately to symptoms suggestive of infectious TB, either in themselves or in their co-workers. As part of a comprehensive response to workplace TB control, employers are encouraged to provide employees TB education to ensure employees' knowledge of such issues as the mode of TB transmission, its signs and symptoms, diagnosis, treatment, and treatment supervision. Employee education should be repeated regularly.

Educating workers about TB?

- Identifying all infectious TB cases in a timely manner;
- Quick identification of the contacts of infectious TB cases;
- Determining whether TB was transmitted to contacts and whether additional contacts should be tested; and
- Identifying infected people for evaluation, treatment, and follow-up.



- Leaflets, pamphlets, magazines, etc. on tuberculosis. Most of these materials are available free of charge from local health authorities; and
- Workplace briefing sessions that can be conducted by a technical expert on the subject.

There are a variety of channels that employers can use to educate the workforce. These include:

Workplace TB Education channels

- contact investigation processes, TB transmission, the method used to determine a contact's risk for infection and prioritization for evaluation and treatment,
- the non-infectiousness of persons with TB disease who have responded and have adhered to treatment more than two weeks, and
- patient confidentiality issues.

If a contact investigation is being conducted because of suspected or confirmed infectious TB, workers should be educated in all aspects of the investigation. Education should include information concerning:

Worker Contact tracing education

- general TB information (provided either at the time of employment or orientation or when being screened for TB). General TB information include the mode of TB transmission, its signs and symptoms, diagnosis, treatment, and treatment supervision;
- the meaning of a positive TB test result and treatment options for newly diagnosed cases;
- comprehensive TB education, including the infectiousness of and treatment for workers being confined or congregated with suspected or confirmed TB disease; and
- the importance of completing treatment for workers with TB disease.

The following components should be incorporated into tailored education programs:

Tailored worker TB Education

- TB infection-control plans including exposure control process.



Workplace contact investigations include:

WORKPLACE CONTACT INVESTIGATION

A person who is exposed to a person with infectious TB is called a contact. If one of your co-workers has tested positive for infectious TB, you become a contact. As a contact, you should confirm that you do not have the symptoms of TB and monitor yourself over time to determine if you may be developing TB symptoms. If you have one of the symptoms, you should get tested for TB immediately.

Exposure to TB at the workplace

Anyone can get TB. TB is spread from person to person via air droplets through coughing, sneezing, or talking. It makes no difference if you are rich or poor, obese or thin, you have the same risk of contracting TB. Everyone is at risk.

Who is susceptible? How does TB spread?

- Cough for more than two weeks
- Fever, especially that rises in the evening (night sweats)
- Pain in the chest
- Breathlessness or difficulty breathing
- Weight loss
- Coughing of blood/blood in sputum
- Loss of appetite

The most common symptoms of TB are:

Tuberculosis is an infectious disease and not a hereditary disease or a curse of God. Any person can get TB. The good news is that it can be cured. The most important thing is to be aware of the symptoms, and if you have any, to seek medical treatment immediately.

What is Tuberculosis?

WHAT EMPLOYEES NEED TO KNOW ABOUT TB IN THE WORKPLACE





Department of Health



in the workplace

TUBERCULOSIS (TB)

What employees need to know about

