

WHY AND HOW IS A CONTACT INVESTIGATION CARRIED OUT?

Persons in the immediate environment of an infectious patient are examined to confirm whether they are infected or ill. This is via a tuberculin skin test, an IGRA (blood test) and/or a lung X-ray.

Persons in the environment of someone who is sick are also examined, to identify the source of the disease. As such, a nurse, together with the person who is sick, draws up a list of people with whom he or she interacted frequently in the last few months: family members, relatives, friends, colleagues, classmates, members of an association or leisure club.



WANT TO KNOW MORE?

Consult your doctor.

Visit **www.departementzorg.be** or contact the Department of Care in your province:

• Antwerp: 02 553 08 92

• Limburg: 02 553 08 93

• East Flanders: 02 553 08 94

• Flemish Brabant: 02 553 08 93

• West Flanders: 02 553 08 94

Visit www.respiratoiregezondheid.be or contact Respiratoire Gezondheid in your province:

Antwerp
 Berchem: 03 287 80 10 - Turnhout: 014 41 13 62

• Brussels: 02 411 94 76

• Limburg: 011 22 10 33 (Hasselt)

• East Flanders: 09 225 22 58 (Ghent)

• Flemish Brabant: 016 79 09 92 (Leuven)

• West Flanders
Ostend: 059 79 02 58 - Kortrijk: 059 79 02 57





RESPIRATOIRE GEZONDHEID

Department of Care infectieziektebestrijding@vlaanderen.be **www.departementzorg.be**

DEPARTEMENT **ZORG**

departementzorg.be

Tuberculosis is an infectious disease caused by the tuberculosis bacteria.

The most common form of the disease is pulmonary tuberculosis. The kidneys, bones, brain, glands or other organs are also sometimes affected.

HOW DO YOU GET INFECTED?

Tuberculosis is transmitted almost exclusively through the air. A person with infectious pulmonary tuberculosis releases tuberculosis bacteria into the air when they cough, speak or sneeze. Individuals in the immediate environment of the person who is sick may breathe in the bacteria. When the inhaled bacteria enter the lungs, they cause a minor inflammation. This usually heals spontaneously, but the inflammation sometimes spreads.

The bacteria can also enter other organs (kidneys, bones, brain, glands, etc.) through the blood or lymphatic pathways. Tuberculosis is almost never transmitted through objects (eating utensils, clothing, books, bedding, etc.)

WHO CAN GET TUBERCULOSIS?

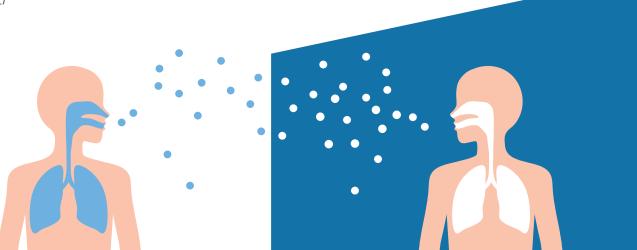
Anyone can get tuberculosis. Young children and people with reduced immunity are more susceptible.

WHAT ARE THE SYMPTOMS?

The most common symptoms of active pulmonary tuberculosis are:

- persistent cough, often with phlegm
- · reduced appetite
- weight loss
- chest pain
- (high) fever
- night sweats
- fatigue

The symptoms do not necessarily occur at the same time. It is even possible that you may not show any symptoms but still have tuberculosis.



IS TUBERCULOSIS CURABLE?

You can be completely cured of tuberculosis.

Treatment usually consists of three or four drugs (antibiotics).

You have to take these antibiotics for at least six months, as tuberculosis bacteria are difficult to destroy. If you do not follow the treatment as prescribed, you may get sick again. There is also a chance that treatment may become less effective because the bacteria no longer respond to common antibiotics.

WHEN ARE YOU INFECTIOUS?

You are infectious if the examined phlegm reveals tuberculosis bacteria (infectious pulmonary tuberculosis).

If no tuberculosis bacteria are detected in the phlegm, it is referred to as non-infectious pulmonary tuberculosis. If tuberculosis is in another organ (outside the lungs), you are not infectious.

If you follow the treatment as prescribed for several weeks, the coughing decreases and you are less infectious. Bear in mind that you are not yet cured at that point. Good coughing hygiene also reduces the chance of infecting others: cough away from others and into a paper tissue with your hand in front of your mouth. Then discard the tissue in the waste bin and wash your hands with water and liquid soap.