



Tuberculosis: Frequently Asked Questions Answered

Q1. What is tuberculosis (TB)?

Tuberculosis is a serious infectious disease caused by bacteria *Mycobacterium tuberculosis*. It primarily affects the lungs, but can affect any part of the body.¹

Q2. How is TB spread?

TB is transmitted from person to person through coughing and breathing by airborne droplets that contain bacteria.¹

Q3. What are the symptoms of TB?

- Cough lasting over 2-3 weeks
- Unintentional weight loss and weakness
- Night sweats and fever
- Chest pain
- Coughing up blood or sputum
- Loss of appetite

If you have these symptoms, you should consult a doctor.^{1,2}

Q4. What are two types of TB conditions?

- **Latent Tuberculosis (No symptoms)**
Latent TB infection (LTBI) affected individuals do not show any clinical symptoms, radiological abnormalities, or microbiological evidence of disease. And they cannot spread TB to others.
- **Active TB (Symptoms present)**

Active TB affected individuals show symptoms like persistent cough, fever, night sweats, weight loss, and fatigue. And they can spread TB to others through airborne droplets.³

Q5. How is TB diagnosed?

- Immune-based diagnostics
- X-ray
- Clinical symptoms and scores
- Cough detection
- Culture of *Mycobacterium tuberculosis* and identifying its resistance profile using phenotypic and genotypic methods
- Next-generation sequencing
- Sputum and non-sputum based molecular diagnosis⁴

Q6. Can TB be cured?

TB can be cured in most cases with proper treatment, including standard and short-course regimens. But cure rates are lower in multidrug-resistant TB.^{5,6}

Q7. What happens if TB is left untreated?

- Most people will ultimately die
- Suffer long-term disability
- Some may recover naturally, with outcomes depending on disease severity, individual health, and setting.^{7,8,9}

Q8. How can TB be prevented?

- TB can be prevented through vaccination (BCG)
- Preventive therapy (especially for high-risk groups like people living with HIV)
- Early detection and treatment
- Targeted screening
- Good hygiene and ventilation
- Wearing masks in high-risk areas^{11,12}

Q9. Can TB come back after treatment?

TB can come back after treatment, by factors such as incomplete adherence, HIV infection, older age, lung cavitation, diabetes, and high background TB incidence.^{13,14,15}

Q10. What is drug-resistant TB?

Drug-resistant TB caused by bacteria that do not respond to standard anti-TB drugs. Including forms like:

- Multidrug-resistant TB (MDR-TB) resistant to first-line drugs Isoniazid and Rifampicin
- Extensively drug-resistant TB (XDR-TB) resistant to multiple second-line drugs

The mechanism of resistance develops further, and ultimately causes uncontrollable totally drug-resistant TB (TDR-TB) that makes treatment longer, more complex, and less successful.^{16,17}

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