HIV and TB: back to basics

By Dr. Monique Andersson

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'We cannot win the battle against AIDS if we do not also fight TB.'
Nelson Mandela

TB is one of the most common infections in people with HIV. The rate of TB in people with AIDS is 500 times higher than that of the general population. TB and HIV are two different infections, but a combination of both causes much death and disease. TB and HIV are often referred to as a bad marriage. They are more destructive together than each on their own.

What is TB?

TB is caused by a tiny bacterial germ called Mycobacterium Tuberculosis (MTB).

While MTB is usually found in the lungs, where it causes pulmonary TB, it can spread to affect any part of the body (extra-pulmonary TB). TB meningitis, a form of TB which affects the brain, is common and can be devastating.

Being infected with TB does not necessarily mean you will become sick. A healthy immune system is able to recognise MTB and stop it multiplying. This is called latent TB. If you have latent TB you cannot transmit it to other people.

However, if the immune system is already weak because of HIV or poor nutrition, MTB multiplies in the body and active TB develops. This is dangerous as it can kill and be passed on to other people.

Commonly, active TB causes a cough, fever and weight loss. Headaches occur with TB meningitis.

How does it spread?

MTB is passed between people when someone coughs or sneezes.

There are a number of factors which increase the spread of MTB. They include:

1 HIV infection – HIV damages the immune system and makes it easier for MTB to multiply.

2 Poverty – People living in poverty tend to live in overcrowded housing and eat inadequate diets. TB spreads quickly in overcrowded, under-ventilated conditions.

3 Living in an area where many people have TB.

How is TB treated?

It is true that TB can be fatal, but the good news is that it can be cured if all medications are taken correctly. TB drugs can be difficult to take – they may have side effects and the course of treatment sometimes lasts for 12 months or more.

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TB medication can interact with other medication like ARVs and cause side effects or stop some medication from working. Traditional medication, alcohol and street drugs should be avoided to reduce the chances of interactions.

What can you do?

1 Know our own TB status and encourage others to know theirs.
2 Advise anyone with TB to have an HIV test.
3 Advise anyone who is HIV positive to be tested for TB.
4 Encourage people to take all medication exactly as prescribed.
5 Educate yourself and others about TB.
6 Prevent infection by:
   a) Covering your mouth when you cough, preferably with a handkerchief or cloth.
   b) Opening windows to let fresh air in.
   c) Letting the sunshine in, because sunshine kills MTB.

Want to know more?

Contact Wambui at wambui@ithemba.org.uk to get a free copy of 'TB in Our Lives' produced by Treatment Action Campaign.

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