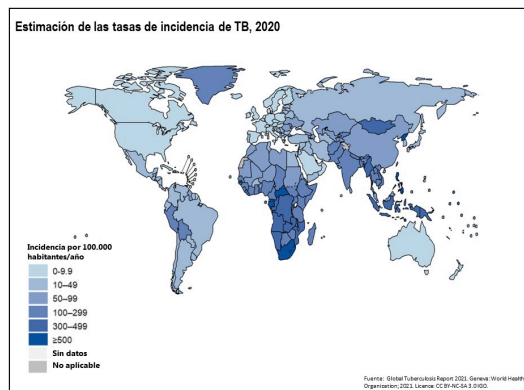
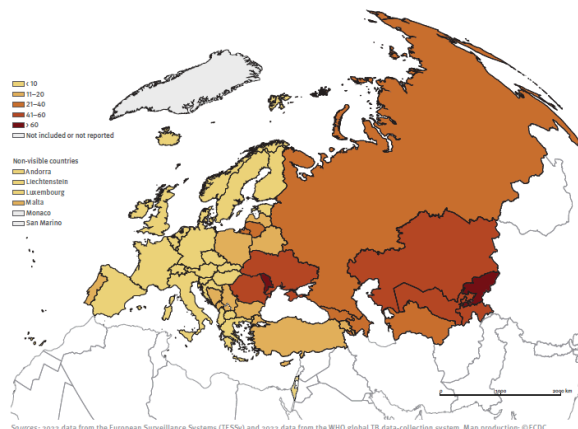


TUBERCULOSIS IN THE WORLD



Map 1. TB notification rates of new TB cases and relapses per 100 000 population, European Region, 2022



Who Is a Close Contact?

You are considered a close contact if:

You spend at least 8 hours (in total) with someone who has TB,

in a closed space, daily or frequently.

Or if you are:

Less than 2 meters (6 feet) from the person,

For more than 15 hours a week.

Risk increases when:

The space is small or poorly ventilated.

You are very close to the person.

Remember: The more time and the less fresh air – the higher the risk.

WHO IS CONSIDERED A CLOSE CONTACT?

The World Health Organization (WHO) defines a close contact of a patient with contagious tuberculosis as someone who has been frequently and for extended periods exposed to a confirmed case of pulmonary tuberculosis with respiratory secretions containing the bacteria. This includes:

- Family members and household contacts: people who live in the same house or share enclosed spaces for several hours a day with the patient.
- Coworkers or classmates: individuals who are in the same enclosed space as the patient, especially when ventilation is poor.
- Healthcare workers: medical staff who care for tuberculosis patients without using proper respiratory protection (such as FFP2 masks).
- People in high-risk settings: such as prisoners, individuals living in shelters, hostels, or those who are homeless. This also includes people who use excessive amounts of alcohol or drugs, or who spend time in environments where there are active tuberculosis cases.

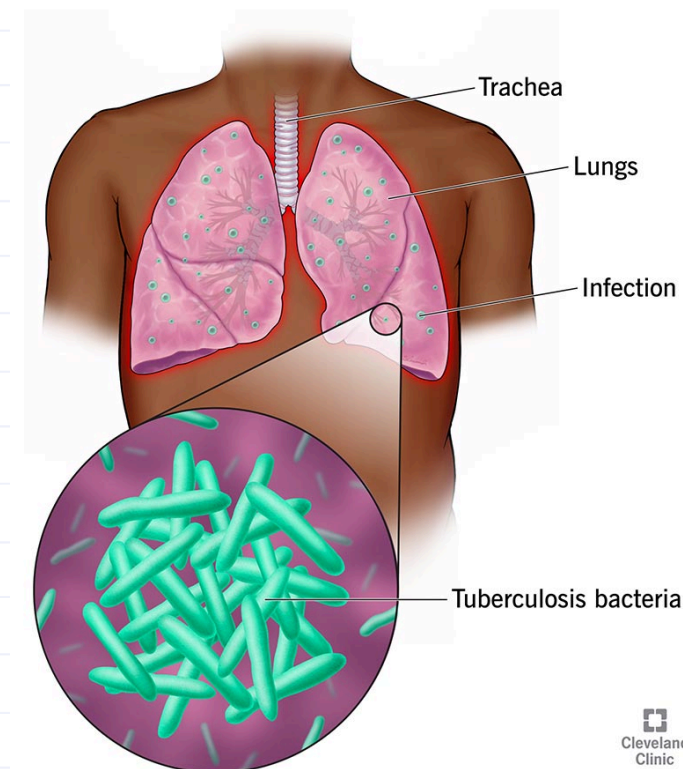
DURATION AND TYPE OF EXPOSURE

- You are considered a close contact if you have spent time with someone who has tuberculosis **every day or frequently for at least 8 hours in a closed space.**
- You're also a close contact if you've been less than **2 meters (about 6 feet) away from that person for more than 15 hours in a week.**
- The closer you are and the less fresh air there is, the higher the chance of getting infected

TUBERCULOSIS: WHAT YOU NEED TO KNOW

II INFORMATION FOR PATIENTS AND RELATIVES

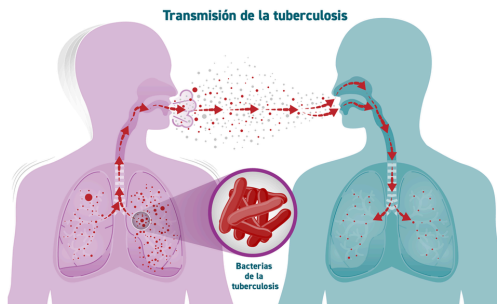
Tuberculosis



WHAT IS TUBERCULOSIS?

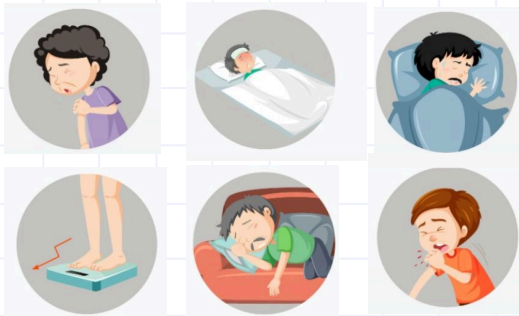
DISEASE (SYMPTOMS) + BACTERIA IS FOUND

Tuberculosis (TB) is a disease caused by a bacteria called *Mycobacterium tuberculosis*. It mainly affects the lungs but can also harm other parts of the body. If not treated, TB can make a person very sick.



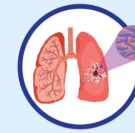
COMMON SYMPTOMS

- Persistent cough for more than 2 weeks.
- Fever and night sweats.
- Unexplained weight loss.
- Fatigue or general weakness.
- Chest pain and difficulty breathing.



HOW IS IT DIAGNOSED?

- **Sputum test:** analysis of mucus to detect the bacteria. It can also be detected in lymph node puncture, joints, pleural fluid, and others.
- **Chest X-ray:** to check if there is any lung damage.
- Through a **skin test** (PPD or Mantoux) or a **blood test** (IGRA), it can be detected if you have ever had contact with the bacteria.
- **REMEMBER:** BEING POSITIVE DOES NOT MEAN YOU ARE SICK



TREATMENT AND PREVENTION

- **Tuberculosis is treated** by taking several antibiotics every day for at least 6 months.
- It is important **not to interrupt the treatment**, as the bacteria can become resistant.
- The **tuberculosis vaccine** (BCG) has not been administered in Spain since 1975 (but it is still given in other countries where TB is more common). It helps prevent severe forms of tuberculosis in children, although it is not 100% effective.
- **Avoid close contact** with people who have pulmonary TB. Keep spaces ventilated until the treatment is effective (for at least one month).

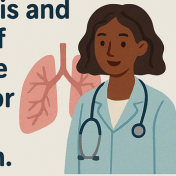
Tuberculosis is treated with a combination of antibiotics for several months.



The BCG vaccine can help prevent the disease.



The diagnosis and treatment of latent TB are important for controlling the infection.



IMPORTANT INFORMATION

- **Tuberculosis can be cured** if the treatment is followed correctly.
- **It can affect anyone**, but it is more common in those with "low defenses."
- In Spain, there are 7-8 cases per 100,000 inhabitants each year, but in other countries in Eastern Europe, North Africa, Sub-Saharan Africa, or Central and South America, it is more common.
- **Detecting the disease early** and treating it properly **saves lives.**

