MYTHS AND REALITY IN TUBERCULOSIS PROF (DR) V. K. ARORA

FORMER: DIRECTOR - NATIONAL INSTITUTE OF TB & RESPIRATORY DISEASES (LRS) & ADDITIONAL DGHS, GOVT OF INDIA, PRESENT: PRESIDENT SEAR - SOUTH EAST ASIA REGION (UNION) & TRUSTEE, TUBERCULOSIS ASSOCIATION OF INDIA, NEW DELHI, VIJAYKUMAR1945@GMAIL.COM







Myth: Tuberculosis is a curse.

Reality: This is a false notion. This is caused by tuberculosis bacteria, which originated in East Africa about 3 million years ago. TB was found in mummies around 15000 years back. Since it is caused by TB bacteria, therefore it can occur in rich and poor persons. It can be prevented by taking appropriate measures and precautions.

Myth: TB is a Genetic disease (Family disease).

Reality: Contrary to some beliefs, TB does not come climbing down a family tree. Instead, it occurs due to Tb bacteria. When a patient coughs, bacteria are released into the air, and droplets remain suspended in the air, which can infect anyone within striking distance.

Myth: There is no cure for TB.

Reality: This is false; TB is treatable, curable and preventable. For treating TB, combinations of drugs are prescribed. In order to get cured, it is important that you must adhere to the therapy for at least 6-9 months.

Myth: TB is always fatal.

Reality: TB can be fatal without treatment, but with modern medicine, doctors can successfully treat and cure the illness.

Myth: On 24th March, we celebrate the birthday of the TB discoverer. Reality: Dr Robert Koch was born in Germany on 11th December 1843. On 24th March 1882, he discovered that tuberculosis is caused by Mycobacterium Tuberculosis. This discovery paved the way for diagnosing TB and treatment.

Myth: TB only affects people in low-income countries.

Reality: TB can affect people anywhere in the world. Those persons who have Comorbidities like diabetes, alcoholism, cancer therapy or on corticoids, and or HIV have more chances of developing the same. India counts for around 30 per cent of TB cases and is one of the eight high burden countries.

Myth: Tuberculosis bacteria causes only tuberculosis in the lungs.

Reality: Tuberculosis bacteria can affect any part of the body i.e. lungs, abdomen, brain, bones, eyes, endometrium etc. TB antibiotics are effective in all types of tuberculosis except for little modifications.

Myth: Tuberculosis May not kill but continue to stay in patients.

Reality: According to the World Health Organization (WHO), TB was responsible for 1.4 m global deaths in 2019. India is a high burden country with National Tuberculosis Elimination Program in place. India will like to eliminate TB by 2025 by achieving targets of SDG (sustainable development goals) of reduction of incidence by 80 per cent and mortality by 90 per cent with a baseline of 2015. In view of an increase in drug resistance TB, A threat is posed to achieving the above targets.

Myth: Tuberculosis spread by shaking hands, utensils of TB patients etc. Reality: Shaking hands, sharing foods or beverages, touching bed linen or toilet seats, kissing and sharing toothbrushes can't spread tuberculosis. It spreads by bacteria of tuberculosis which float in the air during coughing and sneezing of patients having active disease.

Myth: Cough is socially accepted and does not spread Tuberculosis.

Reality: Tuberculosis (TB) is a potentially serious infectious disease that mainly affects the lungs and other organs of the body. When the patient coughs, the bacteria through droplets spread in the air. The longer the patient remains ill without proper diagnosis and treatment, the longer he can infect the community. Evidence suggests that one patient can infect more than 25 patients before the diagnosis is made.

Myth: TB patients must get admitted to the sanatorium and cannot travel to meet their relatives.

Reality: Most important part nowadays of tuberculosis is that you can have the domiciliary treatment, and after 7 to 10 days if the patient feels an improvement, then he can meet his relatives.

Myth: Mother cannot give breast milk to her baby.

Reality: If the mother can use the proper mask and washes her hands properly, then she can give the breast milk to the baby. In fact, effective anti-TB therapy can make the mother non-infective in 7 to 10 days of treatment, and she can continue to breastfeed the child.

Myth: Tuberculosis cannot be treated without a high nutritive diet.

Reality: Even though nutrition is an important part, it cannot replace effective anti TB drugs for killing the TB bacteria. Therefore, compliance with anti TB therapy is an essential step for the cure of patients.

Suggested Readings:

- 1. Barberis, I., Bragazzi, N. L., Galluzzo, L., & Martini, M. (2017). The history of tuberculosis: from the first historical records to the isolation of Koch's bacillus. Journal of preventive medicine and hygiene, 58(1), E9–E12.https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5432783/
- 2. https://www.nhs.uk/conditions/tuberculosis-tb/
- 3. Lawrence R. M. (2011). Transmission of Infectious Diseases Through Breast Milk and Breastfeeding. Breastfeeding, 406–473. https://doi.org/10.1016/B978-1-4377-0788-5.10013-6.
- 4. https://www.cdc.gov/mmwr/volumes/70/wr/mm7012a4.htm
- 5. https://www.who.int/news-room/fact-sheets/detail/tuberculosis