

- Try setting an alarm to remind you to take your tablets
- Ask a family member or friend to be your “treatment buddy” and remind you to take your tablets
- Tell your doctor or nurse if you miss a dose of your TB drugs – they will not be angry and they will try to help you

You should also keep all your clinic appointments. Your doctor or nurse needs to see how you are doing.

Directly Observed Treatment

Making sure you take all your TB drugs can be difficult. It can be especially difficult if your TB is resistant to some of the drugs most commonly used to treat TB, or if you are under other pressures. The good news is that there is help; it's called Directly Observed Treatment, DOT for short.

DOT is a way of helping people during their treatment. Instead of being sent home with your tablets, you might visit your local hospital or pharmacy to take them, or a nurse may come to your home. This means you have someone to chat to, and they can make sure you are able to take all of your TB drugs until you are better.

For more information about TB and to read about real people's experience of the illness please visit *The Truth About TB* at www.thetruthabouttb.org

Remember: Your TB Nurse is there to help and advise you throughout your treatment. Please contact your TB Nurse if you feel unwell on your treatment or if there is anything you are unsure of regarding your TB drugs.

Your TB Nurse is:

Your Hospital Doctor is:

Telephone:

Email:



TB Alert, Community Base, 113 Queens Road, Brighton, BN1 3XG

Tel: 01273 234029 www.tbalert.org

If you have an enquiry about TB, or would like to find out more about the TB Action Group (TBAG) – a patient support and advocacy network – please call 01273 234770

TB Alert is the UK's national tuberculosis charity. Our projects are in the UK, India and Africa, and we also work with international partners to tackle TB as a global issue. Our activities focus on three main areas:

- Raising public and professional awareness about TB, and providing support to patients during their treatment
- Bringing together statutory health services, voluntary organisations and people affected by TB to plan and deliver better TB services
- Developing policy and advocating for the resources to improve the care of patients and the prevention and control of TB

This work supports our organisational mission of increasing access to effective treatment for all people affected by TB.

Any information in this leaflet regarding the diagnosis and treatment of tuberculosis is intended to give general information on the subject only. It is not intended as a substitute for the knowledge, expertise, skill and judgement of physicians, pharmacists or other healthcare professionals in patient care. None of the information contained in this leaflet is intended to be used for decisions on diagnosis or treatment. Questions and concerns regarding diagnosis and treatment should be directed to a healthcare professional.

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Tuberculosis (TB) Treatment



Tuberculosis (TB) is a curable illness and the treatment is free to everyone in the UK. This leaflet will help you understand your treatment and stay motivated while you get better.

What is tuberculosis?

Tuberculosis (TB) is an illness caused by bacteria. TB most commonly affects the lungs, but you can get TB in almost any part of your body. TB is curable with a course of antibiotics, usually lasting six months. TB in the lungs or throat is the only type of TB that can be infectious, which means it can be passed on to other people. Most people will not be infectious within two weeks of starting to take the correct medicine.

How is TB caught?

When someone with TB in the lungs or throat coughs or sneezes, TB bacteria can get into the air where they can be breathed in by other people. You are most likely to have caught TB yourself if you have spent a lot of time with a person with infectious TB, for example living in the same household. It is not easy to catch TB sitting next to a person with TB on a bus or train, since close contact for a number of hours is usually necessary to be at risk of infection. TB is **not** spread by spitting or through sharing objects such as cups, plates and cutlery.

How is TB treated?

TB is treated with a combination of specific antibiotics that need to be taken for at least six months. The length of treatment depends on whether the TB bacteria are resistant to any of the drugs used to treat TB and where the TB is in your body.

Finishing the whole course of treatment is the only way to cure TB completely.

What is the standard treatment for TB?

Your TB doctor or nurse will usually start you on four different drugs. They are:

- ⊙ Rifampicin
- ⊙ Isoniazid
- ⊙ Pyrazinamide
- ⊙ Ethambutol

You may be given all of these drugs together in one tablet called Voractiv. You may be given Isoniazid, Rifampicin and Pyrazinamide together in one tablet called Rifater.

After two months, the treatment can usually be reduced to two drugs, Isoniazid and Rifampicin. These drugs may be given to you in one tablet called Rifinah.

Are TB drugs safe?

TB drugs can sometimes cause side effects, like any other medicine. Information about the different drugs and their side effects can be obtained from TB clinic staff. For example, they may be able to give you another TB Alert leaflet called About Your Tuberculosis (TB) Drugs.

Let your doctor know that you are on TB treatment when being prescribed any other medicines, as they may interact. In particular, TB drugs may *reduce the effectiveness of hormonal contraceptives* (oral pill, implants or other) so women should use additional means of contraception when they are taking TB drugs. Ask your doctor or nurse for advice.

Important: Being on TB drugs puts extra pressure on your liver. Therefore you should try not to drink any alcohol while you are on TB treatment. If you need to drink, it is important to do so in moderation.

Rifampicin, Isoniazid, Pyrazinamide and Ethambutol can be taken safely during pregnancy.

How often should I take my medicine?

TB drugs need to be taken regularly, as directed by your doctor. If you forget to take a dose of your TB drugs, take them as soon as you remember. However, if it is nearly time for your next dose, then miss the one you forgot. **Do not take a double dose.** Always let your doctor or nurse know if you do not remember to take your tablets.

What will happen if I don't finish my treatment?

You should start to feel better once you have been on TB drugs for a while. However, if you do not take all of your tablets for the full length of time prescribed, then the TB will still be in your body.

If you do not finish your treatment:

- ⊙ You may become more seriously ill
- ⊙ You may pass on TB to others
- ⊙ You may develop drug-resistant TB
- ⊙ Your TB treatment will be prolonged

*"I really don't like taking tablets, who does? But I knew I had to, because I didn't want to give TB to my kids or develop drug-resistant TB, which can be really hard to treat. I was so relieved when I finished treatment, as I knew my TB was totally gone."
Natalie, TB patient advocate, TB Action Group*

Where can I go for support?

If you are affected by TB, there is help available so you don't feel alone.

Your TB Nurse is there to support you through your TB treatment. Make sure you attend all your appointments and let the healthcare professionals know if you are having any trouble taking your tablets.

You may find it beneficial to speak to someone else who has also had TB and is now better. TB Alert, the UK's national tuberculosis charity, can put you in touch with a member of the **TB Action Group (TBAG)** who will be happy to chat with you and help you through your treatment.

How can I remember to take my TB drugs?

It is not always easy!

You will be taking your TB drugs for at least six months, so you should get into a routine. Here are some of our suggestions:

- ⊙ Take your tablets at the same time every day and keep them in the same place
- ⊙ Put your tablets in a weekly dispenser
- ⊙ Mark off each day on a calendar as you take your TB drugs