

JAIL BULLETIN

NUMBER 110

JULY 1994

The Jail Bulletin is a monthly feature of the Crime Commission Update. The Bulletin may be used as a supplement to your jail in-service training program if officers study the material and complete the attached "open book" quiz. The Bulletin and quiz may be reproduced for use by your staff. We welcome any jail training material you would like to contribute to the Bulletin.

TUBERCULOSIS IN CORRECTIONAL FACILITIES PART II

WHAT IS TB INFECTION?

Tubercle bacilli can enter the lungs of a person who breathes in air contaminated by someone with infectious TB. The bacteria multiply for a short time in the lungs before the immune system controls their growth. This stage is referred to as TB infection. However, the tubercle bacilli remain dormant in the body and can become active and cause clinical disease later in life.

A person who has TB infection without disease:

- # cannot spread infection to others;
- # is not considered a case of TB;
- # usually has a negative chest x-ray and no symptoms of TB; but
- # does have TB bacteria in his or her body that remain capable of causing disease at any time later in life.

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A positive reaction to the Mantoux tuberculin skin test is usually the only evidence of TB infection.

WHAT IS TB DISEASE?

Some people with TB infection will develop TB disease. This can happen immediately after infection or many years later. Certain factors that suppress the immune system increase the risk of developing TB disease. Among these factors are HIV infection, chemotherapy, malnutrition, and the abuse of drugs (including alcohol). In a person with TB infection, HIV infection is by far the strongest identified risk factor for developing active TB disease.

The general symptoms of TB disease may include:

- # lethargy;
- # weakness;
- # weight loss;
- # loss of appetite;
- # fever; and/or
- # night sweats.

Most cases of TB disease are diagnosed with symptoms prompt the person to seek medical care. Symptoms of TB have often been present for weeks or even months before this point.

The most common site of TB disease is in one or both lungs. The symptoms of disease at this site, called pulmonary TB, may include chronic cough, chest pain and coughing up blood. TB can also occur at any other site in the body, including the kidneys, brain or spine. Symptoms vary depending on the site affected.

WHAT IS THE CONNECTION BETWEEN TB AND HIV INFECTION?

A person with both HIV infection and TB infection is far more likely to develop TB disease than a person with TB infection alone.¹ HIV weakens the body's immune system, allowing the tubercle bacilli to multiply rapidly and spread. There is also a greater chance that HIV-infected persons will develop TB in sites other than the lungs, especially in the lymph nodes.

All persons who have a positive tuberculin skin test should receive counseling and risk assessment for HIV infection too.

It is especially important for people with both TB and HIV infections to take preventive TB medication. The HIV-weakened immune system makes it far more likely for them to develop TB disease than people who are not HIV infected.

If HIV risk behaviors are present or suspected, staff should strongly recommend HIV testing (See Appendix I). Treatment and preventive therapy for TB in HIV-infected persons is different than for those who are HIV negative. (Inmate HIV testing laws and issues vary depending on the state or county in question. It is imperative that inmates receive counseling both before and after HIV testing, and that confidentiality be carefully maintained. Those who test positive for HIV should be educated about their risk of tuberculosis.)

REFERENCE

Selwyn Pa, Hartel D, Lewis V. et al. A prospective study of the risk of tuberculosis among intravenous drug users with human immunodeficiency infection. NEJM 1989; 320:545-549

Information in this Jail Bulletin was taken from "Control of Tuberculosis in Correctional Facilities, A Guide for Health Care Workers," A publication of the U.S. Department of Health and Human Services.

QUIZ

Nebraska Jail Standards require that jail staff receive eighteen (18) hours of inservice training each year. The Jail Bulletin may be used to supplement inservice training if an officer studies the bulletin, completes the quiz, and this process is documented by the jail administrator for review during annual jail inspections.

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SUBJECT: Tuberculosis in Correctional Facilities - Part II

NAME: _____
DATE _____

1. A person who has TB infection without disease can easily spread the infection to others.

_____ True _____ False

2. List 3 symptoms of TB disease.

1)

2)

3)

3. Chronic cough, chest pain and coughing up blood are symptoms of pulmonary TB.

_____ True _____ False

4. A person infected with both HIV and TB is far more likely to develop TB disease than a person with TB infection alone.

_____ True _____ False

5. Persons who have a positive TB skin test should receive counseling and risk assessment for HIV infection too.

_____ True _____ False

CREDIT: One half hour credit for jail inservice training requirement

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_____ True X False

2. List 3 symptoms of TB disease.

- | | |
|----------------|---------------------|
| 1) Lethargy | 4) Loss of appetite |
| 2) Weakness | 5) Fever |
| 3) Weight Loss | 6) Night Sweats |

3. Chronic cough, chest pain and coughing up blood are symptoms of pulmonary TB.

 X True _____ False

4. A person infected with both HIV and TB is far more likely to develop TB disease than a person with TB infection alone.

 X True _____ False

5. Persons who have a positive TB skin test should receive counseling and risk assessment for HIV infection too.

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ANSWER SHEET SHOULD BE RETAINED BY JAIL ADMINISTRATOR.