EARLY DETECTION AND PREVENTION OF TUBERCULOSIS (TB) IN CHILDREN

Risk factors in children acquiring TB:

- Children living in the same household as a lung TB patient (especially children under 5)
- Children living with HIV
- Children with malnutrition
- Children living in poor conditions and in badly ventilated houses.

If your child has one of the following signs or symptoms of TB:

- Prolonged cough or difficulty breathing with no improvement or coming back quickly when treated with antibiotics
- Weight loss or a failure to gain weight
- Persistent fever
- Night sweats

Please take your child to a district health center for free diagnosis and treatment.

Protect children from TB:

- Vaccinate all newborn babies and children under 1 year old with BCG.
- Provide children under 5 years old or children with HIV and living in the same house with a lung TB patient with TB prevention medicine (under the instruction of TB control workers). Children must not have TB while taking TB prevention medicine.
TB prevention medicine is used for children under 5 years of age or for children with HIV and living in the same house with a TB patient. Children must not have TB while taking TB prevention medicine.

TB prevention medicine is used to reduce the risk of children acquiring TB.

TB prevention medicine is effective if it is used every day for 6 months.

TB prevention medicine is safe.

- Provide BCG vaccination at birth and for children under 1 year old, through the universal vaccination program. Do not vaccinate children with HIV.
- Prescribe TB prevention medicine for children who are at the risk of acquiring TB (under the instructions of TB control workers).
- Provide children with good nutrition
- Create a clean, hygienic and well ventilated living environment

DON’T LET CHILDREN ACQUIRE OR DIE FROM TUBERCULOSIS (TB)

- Local Health Station
  - Register for TB screening
  - If TB is suspected, send to TB Control Worker for TB examination and consultation

  Move children with TB to communal health center for treatment

- District TB units
- Provincial Lung Hospitals
- TB examination and consultation
- TB diagnosis and treatment
TB is caused by TB bacilli. TB bacteria enter the body through the respiratory tract, so they mainly cause lung TB.

Lung TB patients spread TB bacteria into the air when coughing, sneezing and talking. These bacteria are inhaled by people around them, causing TB.

Children living in the same house as a lung TB patient will be infected and at high risk of developing TB disease if they do not take medicines to prevent TB.

To prevent TB in children, the following measures are recommended:

- **Children living in the same household as a lung TB patient, especially children under 5 years old**
- **Children living with HIV**
- **Children with malnutrition**
- **Children living in poor living conditions and badly ventilated houses**

When children (especially those living in the same house as a TB patient) have one of the following signs:

- Prolonged cough or difficulty breathing with no improvement or coming back quickly when treated with antibiotics
- Weight loss or a failure to gain weight
- Persistent fever
- Night sweats

First and foremost, take the child to the local health station for registration and referral for free diagnosis and treatment.
THINGS TB PATIENTS SHOULD KNOW AND DO TO PROTECT THEIR RELATIVES AND THE COMMUNITY

1. Be committed to your treatment and always remember the 4 principles of treatment.

2. Wear a mask throughout the duration of treatment, when in contact with other people.

3. Cover your mouth and nose with a tissue, soft paper or your sleeve when coughing or sneezing.

4. Do not spit. If you must spit, do it into a tissue or a paper cup and either put them in the trash or burn them.

5. Wash your hands with soap often, to keep them clean.

6. Keep windows open to reduce the amount of bacteria in the air. Sleep alone in a well ventilated room during treatment.

If TB drugs are not taken as prescribed, the TB bacteria can become resistant during treatment. Not adhering to the 4 principles of treatment will create drug-resistant TB. Patients need to be constantly reminded to abide by the principles. Drug resistant TB is very dangerous because:

- It costs 100 times more to treat drug-resistant TB compared to normal TB.
- It takes longer to treat. Treatment lasts from 18-24 months.
- The drugs have many side effects, cause patient fatigue and can be hard to tolerate.
- The cure rate is low and the risk of death is high.

INCORRECT TREATMENT OF TB MEANS THE DISEASE BECOMES RESISTANT TO THE DRUGS
Tuberculosis (TB) is an infectious disease caused by the TB bacteria.

TB can be transmitted from a lung TB patient to healthy people through the air.

The source of TB infection is lung TB patients.

Lung TB patients spread TB bacteria through the air when coughing, sneezing and talking. These bacteria are inhaled by surrounding people, causing them to be infected with TB.

An untreated or uncured lung TB patient can infect between 10-15 people a year.

TB is curable when TB patients adhere to THE FOLLOWING 4 PRINCIPLES:

- Taking all the provided drugs
- Taking drugs at the proper dosage
- Taking drugs every day
- Taking drugs for the prescribed duration (at least 6 consecutive months)

AFB (+) patients need to do a sputum smear test after the 2nd, 4th and 6th month of treatment.

AFB (-) need a sputum smear test after the 2nd and 5th month of treatment.