



### Why must I check my status? Tuberculosis (TB) is one of the

leading causes of death in South Africa. People living with HIV are also more likely to be infected with TB. This condition affects 50% of those living with HIV. It is therefore important to have your annual TB check up, even if you are on HIV treatment.

### What does POLMED cover?

As TB is a chronic condition that forms part of the POLMED chronic diagnostic treatment pairs (DTPs), the treatment of this condition will be funded in full as a prescribed minimum benefit (PMB) condition. If you have any questions about your cover for TB, contact a consultant via POLMED Chat or call the POLMED Client Service Call Centre on 0860 765 633.

### **POLMED** benefit for TB screenings

- The Preventative Care Benefit allows
  for one TB screening per member per
  annum (pre-diagnosis).
- Your TB screening will be paid from your Preventative Care Benefit and will not have an impact on your overall out-ofhospital benefits.



### Who is at risk?

Those more at risk of developing active TB are:

- senior citizens
- babies
- diabetics
- people living with HIV
- those on anti-rejection medication
  after transplants
- those undergoing or who have received chemotherapy
- malnourished people.

#### Pulmonary TB may increase when:

- you have frequent contact or live with a person who has untreated/ undiagnosed TB
- you live in an overcrowded area with poor living conditions (e.g. lack of reliable sanitation services, lack of clean water, poor ventilation and other health hazards).

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### TB tests can include:

- sputum analysis
- tuberculin skin test
- chest X-ray
- biopsy
- blood tests and other tests.

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### What will your doctor do?

- Run a number of tests.
- Give results and diagnosis.
- Prescribe treatment.
- Explain precautions if undergoing any treatment.
- Continue to monitor progress.

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### Symptoms

### Symptoms may include:

- coughing for more than two weeks
- night sweats
- fatigue and lethargy
- feeling sick
- chest pains
- loss of appetite
- weight loss
- failure to thrive
- difficulty in breathing
- fever and chills
- coughing up blood-stained sputa
- haemoptysis (coughing up blood).

NOTE: The first stage of pulmonary TB flows without symptoms.

### Why must I comply?

- To prevent resistance to treatment – multidrug-resistant (MDR) TB.
- To prevent complications of extensively drug-resistant (XDR) TB, which is very difficult and expensive to cure.
- Non-compliance may lead to hospitalisation, removing you from work and loved ones until you are no longer infectious.

### Get tested for TB



### Treatment

- Treatment usually lasts six months and may require a longer treatment course for people living with HIV.
- The treatment includes a combination of drugs.
- Sometimes people may develop resistance to drugs due to noncompliance (refer to 'Why must I comply?' for more information).

### Complications

If pulmonary TB is not treated, it may cause lung damage.

### **Treatment side effects**

- Liver disorders
- Rashes
- Vision changes
- Discolouration of urine or tears



### **Contact your doctor if:**

- you are exposed to TB
- you have TB symptoms
- your TB symptoms persist after treatment
- the TB skin test is positive (raised), as it indicates exposure.

