Tuberculosis and HIV co-infection

FAST FACTS

• Tuberculosis (TB) is one of the most common co-infections that people living with HIV can develop.

• Testing for TB can be easily done with a blood test or by taking a sample of mucus or other bodily fluid.

• If you are diagnosed with active TB, you will be offered treatment with a course of antibiotics.

What is TB?

TB is an infection which most commonly attacks the lungs or throat (pulmonary TB). It can also attack other parts of the body (extra-pulmonary TB), such as the lymph nodes, spine or brain.

If you're living with HIV, it means that:

• you’re more likely to develop TB because of a weakened immune system.
• you can reduce the risk of TB by taking your HIV treatment correctly to keep your immune system strong and healthy.
• get tested for TB regularly.

How do you get TB?

There are two types of TB infection; ‘active’ and ‘inactive’. If someone with ‘active’ TB coughs or sneezes, the bacteria in these tiny droplets can be passed on to another person through the air.
Active TB and HIV

Active TB means it’s spreading throughout the body, and the immune system can’t prevent symptoms and illness. Symptoms of active TB include:

- a cough for more than 3 weeks
- extreme tiredness
- fever
- night sweats
- loss of appetite
- weight loss.

Symptoms of active extra-pulmonary TB often include swollen glands or pain in the affected area.

Inactive TB and HIV

If a person has inactive (or latent) TB, it means their immune system has been able to fight the disease and stop it from causing illness. They don’t have symptoms and can't pass it on to other people.

In some people, TB remains inactive for their whole life. In others, TB may become active if their immune system weakens - for example by having HIV.

HIV and TB co-infection – the risks

If you're living with HIV and also have TB, you are said to have a co-infection. This means that TB:

- is harder to diagnose
- spreads faster / can spread to other parts of the body
- is more likely to be fatal if left untreated
- is more likely to return after being treated
- is harder to treat if you have a drug-resistant strain.

How can I prevent TB?

It’s difficult to prevent TB because it can be passed on via air. Covering your mouth with your hand or a tissue when coughing or sneezing can help to stop the spread of TB.

The most effective way to prevent TB is to get tested and treated.

The BCG vaccine against TB

The BCG vaccine is around 80% effective but only for 15 years, so it’s being phased out in some countries where TB is not a major problem.

Can I get tested for TB?

There are many types of TB tests. Usually TB is diagnosed by a blood test. However, other options
could be a sample of sputum (the mucus that is coughed up) or another body fluid. Other tests involve a small amount of TB protein being injected under the skin to see if there’s a reaction.

Your healthcare professional may also recommend a chest x-ray to see if TB has scarred your lungs.

How is TB treated?

Treating active TB

Active TB can almost always be cured with antibiotics. For pulmonary TB, antibiotics are usually taken daily for six months. For people with TB in other parts of their body, treatment will last longer.

Treating inactive TB

Treatment is not required for most people with inactive TB. However, if you’re living with HIV, TB treatment is always necessary to prevent TB causing illness and to cure it. A similar course of treatment to active TB will be recommended.

Treating TB and HIV at the same time

If you have TB and HIV it can be difficult to take drugs for both at the same time because of the number of drugs and how often they need to be taken, and because of the interactions between them. Your healthcare professional can advise you on this.

Sometimes you may be asked to take your treatment in the presence of a healthcare professional to check you’re taking it correctly.

What if I don't take my TB treatment correctly?

If you don’t, or can’t, take your treatment properly, or stop taking it before the end of your course of treatment, TB becomes resistant to the drugs and they stop working.

At this point, treatment options are limited as the other available drugs are less effective. You’ll be closely monitored throughout treatment to ensure it’s working.

It’s important you take your course of TB treatment correctly so that TB doesn’t become resistant to the antibiotics.

If you’re worried about taking your HIV and TB treatment correctly then talk to your healthcare professional who can help and support you to get into a routine where your medication will be effective.

©iStock.com/Sasha_Suzi. Photos are used for illustrative purposes. They do not imply any health status or behaviour on the part of the people in the photo.
Sources:
TB Alert 'What is TB?' (Accessed June 2018)
TB Alert 'TB and HIV' (accessed May 2018)

Last full review: 20 June 2018
Next full review: 20 June 2021
Last updated: 2 July 2018