

---

---

## Tuberculosis

(Last updated on 17 October 2017)

### Clinical description

Tuberculosis (TB) is a chronic bacterial infection characterized pathologically by the formation of granulomas, most common site of infection is the lungs, but other organs may be involved:

- **Pulmonary tuberculosis:** Classical symptoms including persistent cough, haemoptysis, afternoon fever, night sweating and weight loss.
- **Extrapulmonary tuberculosis:** Clinical features referable to the respective organ/ system and general well-being affected.

### Clinical case definition

A case that meets the following criteria:

- Signs and symptoms compatible with active tuberculosis; **AND**
- Supporting evidence from relevant and clinically indicated diagnostic evaluation (e.g., abnormal, unstable [i.e., worsening or improving] chest radiographs); **AND**
- The attending physician forms the opinion that treatment for active tuberculosis with a combination of anti-tuberculosis medications is required

### Laboratory criteria

Any of the following:

- Isolation of *Mycobacterium tuberculosis complex* (*M. tuberculosis*, *M. bovis* or *M. africanum*, excluding *M. bovis* var *BCG*) from a clinical specimen (through culture and identification tests)
- Demonstration of *M. tuberculosis* from a clinical specimen by nucleic acid amplification test (e.g., polymerase chain reaction together with species-specific probe)
- Demonstration of acid-fast bacilli in a clinical specimen (e.g., histological examination)

---

## Confirmed case

A clinically compatible illness that is laboratory confirmed, or in the absence of laboratory confirmation, a case meeting the clinical case definition and showing an appropriate response to treatment.

## Probable case

All cases meeting either the clinical case definition or laboratory criteria, but not the full set of criteria for a confirmed case.

## Remarks on TB notification:

- If there is strong clinical suspicion of active tuberculosis, notify the case even before all the criteria for clinical case definition are met
- Notification should be made for suspected or confirmed cases even after their death
- When a fresh episode of active tuberculosis, such as relapse of pulmonary tuberculosis, occurs in the same patient
- Notification is not necessary for the following conditions when there is no evidence of active TB:
  - i. Persons who are found to have old TB scars on chest radiographs
  - ii. Recent conversion of tuberculin skin test from negative to positive without supportive clinical or radiographic evidence of active disease
  - iii. Cases given medications for treatment of latent TB infection only (or “TB chemoprophylaxis”)
  - iv. Cases diagnosed as having disease caused by non-tuberculous mycobacteria
  - v. Complications of BCG vaccination or diseases caused by *Mycobacterium bovis* var *BCG*