



**HIV/AIDS QUALITY OF
CARE INITIATIVE
(HAQOCI)**

Clinical Epidemiology Resource & Training Centre
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Supported by U.S. Centers for Disease Control and Prevention
(CDC)- Zimbabwe AIDS Program

TUBERCULOSIS (TB) AMONG PATIENTS INFECTED WITH HIV

Opportunistic Infection Prevention Clinic
Clinical Epidemiology Resource & Training Centre
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Brochure Series QOC 8



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People who are HIV + are in danger of getting tuberculosis (TB). Early diagnosis and effective treatment of TB among HIV infected persons is critical for curing TB, minimising the negative effects of TB on the course of HIV and interrupting the transmission of germ *mycobacterium tuberculosis* to other persons in the community.

How To Recognise TB in HIV

If a person with HIV develops any of the following then they may have TB;

1. Cough with or without fever.
2. Night sweats.
3. Weight loss.
4. The chest X-ray will show pneumonia with or without cavities(holes in the lungs).

The only way a person can know if they have the HIV virus is to go for a blood test. After the blood test the person must go back for the results.

When TB disease develops in an HIV infected person the course of the HIV is made worse but it depends on the person's degree of immuno-

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suppression and response to TB drugs.

The death rate in patients with HIV also infected with TB is 4 times higher than in a person with only HIV and no TB.

This is because active TB worsens the severity of HIV infection. Active TB is also associated with an increased risk for opportunistic infection such as PCP (pneumocystitis carinii pneumonia and oral thrush etc).

TB seems to act as a potent stimulus for the growth of the HIV virus and hence TB affects the clinical course of HIV disease in a bad way. Prevention, early recognition and effective treatment is required for both diseases.

What To Do?

1. TB can be cured but you have to visit the health clinic or hospital
2. It is important to follow instructions on how to take the medicine because it takes a long time for the TB to go away.

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