

Podcast: Podcast on TB and Covid-19

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My name is Ute Papkalla , I am a member of the health team of the German Institute for Medical Mission, also called Difäm. With me is my colleague Carina Dinkel. Today we want to talk about a challenge that has skipped attention due to the threat posed by Covid-19. During the last year, testing and treatment of tuberculosis has declined remarkably. Why is this so?

You are pointing to a big problem. Due to the fear of Covid-19, patients do not come to the health facilities for a TB test or for their medication. Alternatively, their TB will not be recognised but diagnosed as Covid-19. That means that patients will not get the correct treatment. Some are even co-infected with both diseases and have a greater risk to develop serious symptoms because TB has already damaged their lungs.

I have always had the feeling that signs and symptoms of Covid-19 and tuberculosis are very similar. Therefore it seems easy to confuse the diagnoses.

Ok, both diseases primarily affect the lungs, which means that patients with TB or Covid-19 present with coughing and fever. They feel pain in the lungs and have trouble breathing. These are all respiratory symptoms, which are similar for the two diseases.

However, there are differences. One big difference is that the incubation period from exposure to disease in TB is longer, often with a slow onset. In contrast, a symptomatic Covid-19 patient develops the symptoms quickly within a few days.

Also the symptoms of the two diseases are a bit different: Covid-19 patients often have a persistent dry cough, fever and difficulty breathing. With a pulse oximeter, you can sometimes see that the oxygen level in the blood of the Covid patient falls below 95%. Some people with Covid-19 also suffer from diarrhoea.

A TB patient can also have fever and a cough. While Covid-19 mostly comes with a dry cough, TB patients bring up sputum when coughing sometimes mixed with bloodstains. Very specific is a weight loss of the patient over a longer period of time as well as night sweats. The fever is normally persistent over a very long time but not very high.

So there are some very similar symptoms and some specific ones. Does it make sense to test for both diseases?

In settings where TB infection is common, it definitely makes sense. To test for Covid-19 you need to do a swab, for the TB test you need a sputum sample of the patient. Unfortunately, for TB we do not have the simple tests that are now available for Covid-19 testing.

Nevertheless, you can do the screening for potential TB with the typical additional symptoms: Bloody cough, weight loss and night sweats. You should also always ask the patient for how long he or she has had the symptoms and if other family members have had lung problems in the past or even TB. If you have a patient that shows these symptoms, then test or send the person to a hospital where this can be done. Even if you do not have the possibility to test for TB, you should always keep TB in mind when you see a patient with respiratory symptoms no matter if they come from Covid-19, influenza or a normal cold. If the respiratory symptoms do not get better after two weeks, the patient should definitely undergo a TB test.

What about the treatment of the two diseases; is it similar?

No, there is a big difference between the treatment of TB and the treatment of Covid-19. Covid-19 is a viral disease and we currently have few treatment options apart from oxygen and cortisone for the patients who develop a severe pneumonia. However, the huge majority of patients recover from Covid-19 with the help of their own immune system. Covid-19 can even be treated at home, if patients show only mild symptoms.

In contrast, tuberculosis is a bacterial infection and against this type of infection, we have antibiotics at hand. You have to take the antibiotics 6 to 9 months but then you will be cured. That is why it is so important to take care that the TB patients continue taking their medicine. If they stop taking their antibiotics before the bacteria are completely killed, they will become resistant against the drug; and multi-drug resistant tuberculosis is an increasing problem.

Should patients with TB or with TB and Covid-19 co-infection be kept at the clinic?

Actually, TB patients should be treated at home if their overall health status allows. However, we must assure that they are really taking their antibiotics. Usually, we do this with the help of community health workers who observe the patient when he or she is taking the drug. This is called DOT- directly observed treatment. Even a patient who is co-infected with TB and Covid-19 should be subjected to DOT. It can be done at home if the Covid-19 symptoms are mild or at the clinic if the symptoms are stronger.

However, just let me point out one thing: Try to keep potential Covid-19 patients and potential TB patients apart from each other.

Why is that?

Well, both types of patients are at a higher risk to catch the other one's disease and to become co-infected during their visit at the health center. So do not mix patients with

confirmed Covid-19 and suspected or confirmed TB. We do not want to have patients with TB lying on the same ward as patients with Covid-19.

OK, that is clear. Do I have to protect myself even more when I deal with a patient suspected of having both, Covid-19 and TB?

Not really. The personal protective equipment recommended for Covid-19 also protects against TB transmission. So wear a mask, gloves and a face shield, and you will be fine.

Both diseases spread through droplets that are expelled when coughing, sneezing, or talking. For TB this is the TB bacillus and for Covid-19 the coronavirus. The very, very light drops – the so-called aerosols – can stay in the air for several hours and infect other people. The thicker droplets fall down and land on surfaces and objects. When you touch them and then you touch eyes, nose or mouth the germs can enter your body.

This explains why handwashing is so very important!

Yes, and of course respiratory precautions are also very important. The concentration of infectious material in the air goes down when the rooms are well ventilated. In addition, you can prevent infection with both diseases if you wear a mask.

What about stigma?

This is always a problem. We have stigma in all fields of infectious diseases: HIV, TB, leprosy and now Covid-19.

There is so much fear out there of contracting the infection, so what do you expect? Therefore, people with symptoms hide their status and this contributes to spreading the infection. They fear showing that they need help and hide their illness. It even prevents people from seeking health care. The status is unrevealed and the disease can spread without limit.

How can we tackle this in our communities?

I think good information is helpful. The social media platforms which are used to discriminate people with communicable diseases could also be used for dissemination of proper information and solidarity campaigns.

Thank you very much for this interesting information on TB and Covid-19. We should not forget that there are other diseases around which need as much attention as Covid-19. Just to summarize what we have learned:

It is difficult to differentiate Covid-19 and TB in a patient. However, there are some signs that indicate a TB infection: bloody cough, weight loss and night sweats. You may even see patients with a co-infection of both diseases. They are more at risk of developing severe Covid-19 because their lungs are already damaged. You should always consider testing for

both diseases or refer the patient for TB testing. Moreover, you have to take care that TB patients do not stop taking their antibiotics. This is very important.

However, the good news is the current precautions prevent both, TB and Covid-19. So do not forget to keep your distance, wash your hands frequently and wear a mask in crowded places. Keep healthy.

Be blessed and stay safe

<https://www.who.int/news-room/q-a-detail/coronavirus-disease-covid-19-tuberculosis>

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