When did the health department investigation begin?
The Summit County Health District was notified Jan. 3 and immediately began an investigation into a member of the community who was diagnosed with tuberculosis. The investigation found that the individual had been a visitor in the Akron Children's Hospital neonatal intensive care unit (NICU) at Summa Health System - Akron Campus between mid-November and mid-December. Once notified of the patient's diagnosis, both Summa Health System and Akron Children's Hospital followed recommended guidelines.

Are patients and staff at risk of being exposed to tuberculosis?
Patients not in the NICU but who were in the hospital during the impacted timeframe have not been found to be at increased risk for exposure to TB.

If I had a baby in the Akron Children's NICU at Summa, how do I know if he was exposed?
Akron Children's Hospital is notifying the families of all NICU patients with any risk of exposure. Because the exposure occurred over a specific timeframe, we're able to identify which patients may have been exposed.

My baby was a patient in the NICU and I have new contact information. How can I make sure that my child was not among those patients exposed?
If you have recently moved and your baby was a neonatal intensive care patient at Summa Health System-Akron campus from mid-November to mid-December, 2016, call 330-543-0803 to see if your child was possibly exposed.

I was a patient at Akron City Hospital at that time. Am I at risk, do I need to be tested?
Currently, the investigation is focused on the NICU and Akron Children's Hospital is contacting the families and staff members of that unit. Based on our investigation so far, we have not identified anyone outside the NICU who would be at risk for TB infection. We are contacting people who need to be tested.

Where can I get additional information about the investigation?
If you had a child in the NICU during the impacted timeframe, Akron Children's Hospital will contact you directly.

If you did not have a child in the NICU, and would like more information regarding the investigation, call the hotline at 330-543-0803.

What is tuberculosis (TB)?
TB usually appears as a disease of the lungs, but can also cause disease in other parts of the body. It's caused by bacteria called Mycobacterium tuberculosis. The bacteria are spread through the air from one person to another. While the bacteria usually attack the lungs, they can attack any part of the body such as the kidney, spine and brain.
Not everyone infected with TB bacteria becomes sick. In most people who become infected with TB, the body is able to fight the bacteria to stop them from growing. These people don’t feel sick and don’t have any symptoms. They are not contagious and cannot spread TB bacteria to others.

However, if the bacteria become active in the body and multiply, a person will become sick with TB disease.

People with TB disease may be able to spread the bacteria to others. Some people develop TB disease soon after being infected while other people may become sick years later.

**How does TB in an infant differ from an adult?**

TB in infants may be more difficult to diagnose at first because they may initially have few symptoms or symptoms that appear like common viral infections. Despite having few symptoms, infants can develop serious pulmonary infection and are at much higher risk for life-threatening complications, including meningitis and blood stream infection.

**How does TB spread?**

TB germs can be spread through the air when a person with active TB of the lungs or throat talks, coughs or sneezes.

Once TB germs hit a hard surface, such as a table or floor, they die and can no longer cause infection to a person who touches that surface.

People with TB disease are most likely to spread it to people they spend time with every day. This includes family members, friends and co-workers. It is much less likely, but not impossible, to catch TB from someone you have not spent much time with.

TB is not spread by shaking someone’s hand, touching bed linens, door knobs, toilet seats, or sharing silverware, plates or cups.

**How does a person become sick with TB disease?**

There are 2 types of TB-related conditions: latent TB infection and TB disease.

**Latent TB**

Latent TB occurs when a person is infected with the TB bacteria, but has no signs or symptoms suggestive of active TB disease. They have a positive skin test or blood test for TB infection and a chest x-ray showing no active disease. The body's immune system can often keep the germs under control as long as a person is otherwise healthy.

In other words, the disease is dormant, sleeping or inactive, and the person does not feel sick.

People with latent TB infection should consider treatment to prevent progression to active TB disease. A person with latent TB cannot spread the disease to anyone else. About 1 in 10 people who have latent TB infection go on to develop active TB disease.

**Active TB**

Active TB disease develops if the immune system cannot keep the tuberculosis germs under control and they begin to attack the body.
A person with active TB disease will usually feel sick or have an abnormal chest X-ray. Sometimes people don’t feel sick even when they have active TB. A person can spread the disease to others at this stage.

Fortunately, active TB disease is treatable and curable.

Ideally, a person with active TB disease should be separated from others until she is no longer contagious.

The time until a person under treatment is no longer contagious varies, but treatment usually needs to occur for months. Monitoring by a healthcare provider is very important. Cooperating with the healthcare provider’s treatment plan is equally important.

**What are the symptoms of active TB in infants?**
Symptoms may include:

- Cough
- Fever
- Loss of appetite
- Localized rales or wheezing
- Diarrhea and/or vomiting
- Weight loss
- Seizures

**What are the symptoms of active TB in adults?**
The most common symptoms of active TB disease in adults are:

- a cough lasting more than 3 weeks
- fever
- heavy sweating at night
- loss of appetite
- weight loss
- coughing up blood
- pain in the chest
- chills
- weakness or fatigue

**Can someone with active TB spread the disease to others?**
Yes. A person with active TB disease of the lungs or throat can spread the germs by coughing, talking or sneezing. Casual contact with someone with active TB disease is not necessarily risky. People who could be at risk are those who have had long, frequent or close, face-to-face contact with a person who has active TB disease in his or her lungs.

**Can a person with latent TB spread infection?**
Contact with someone with latent TB infection carries no risk.

If I have latent TB infection, how can I keep from developing TB disease?
If you have latent TB infection, you can take medication to protect you from developing active TB disease.

However, many people who have latent TB infection never develop TB disease and some people who have latent TB infection are more likely to develop TB disease than others. People with latent TB infection who are at high risk for developing active TB disease include:
• People with HIV infection.
• People who became infected with TB germs within the last 2 years.
• Babies and young children.
• People who inject drugs.
• People who are sick with other diseases that weaken their immune systems.
• Elderly people.
• People who had TB in the past but were not correctly treated.
• People who have been exposed to a person with active TB disease.

Can people die from TB?
Yes, if not treated. However, TB is almost always curable with proper treatment.

How is TB diagnosed?
There are 2 kinds of tests that can determine whether a person has been infected with TB bacteria. One is the tuberculin skin test, the other is a TB blood test. A positive result from either test indicates that a person has been infected with TB, but does not indicate whether the person is currently sick with active TB disease. Diagnosis of active TB disease is based on a person’s medical history, physical examination, chest X-ray and other laboratory tests.

What does a positive TB test mean?
A positive reaction usually means you have been infected with the TB germ. It could be positive if you either have active TB disease or have latent TB infection. If you have a positive test, your doctor or nurse might do other tests (such as a chest X-ray or a test of the phlegm you cough up) to see if you have active TB disease. The results of these tests will determine what type of medicine you’ll need to take. These medicines treat the infection and help prevent you from getting active TB disease if you have latent TB infection, or to cure you if you have active TB disease.

What happens if someone has a positive test for TB infection?
People who have a positive test for TB infection will be evaluated to determine if they have TB disease. Anyone with active TB disease will receive medication and a treatment plan from the health district. Anyone who tests positive for TB infection but does not have active TB disease will be offered treatment to ensure they do not develop TB disease.

If I have a positive TB test, does that mean I have infected my family?
If you have a positive test but do not have active TB disease, there is no risk that you spread the germs to your family. However, if you have active TB disease, your family members will be contacted to find out if they need to be tested and possibly treated.

How is active TB disease treated?
Active TB disease is generally treated with a 6- to 9-month course of several antibiotics. The treatment must be followed exactly as it is directed by a healthcare provider or there is a risk of the TB bacteria becoming resistant to the medication. Most people start to feel better after a few weeks of taking medication. They cannot return to work or school until they are no longer contagious.

If you have questions or would like further information please call or visit:
Akron Children’s Hospital Hotline at 330-543-0803, or www.akronchildrens.org
Summa Health System at www.summahealth.org
Summit County Public Health at 330-283-6380 evenings/weekends/holidays and 330-375-2662 Monday – Friday 8:00am – 4:00 pm or www.scphoh.org