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**YUKONERS NEED UPDATED INFORMATION ABOUT TUBERCULOSIS**

WHITEHORSE – Yukon’s Medical Health Officer Dr. Bryce Larke and the territory’s Communicable Disease Officer, Colleen Hemsley, want Yukoners to know more about tuberculosis and how it is affecting Yukon.

“Since late fall 2004, we have had a total of 10 cases of tuberculosis in the Yukon,” Larke said. “Given our low numbers previously, we are viewing this situation with concern.” In 2002 and 2003, there were no cases of tuberculosis (TB) in the Yukon; in 2001, there was only one case.

“We do have tuberculosis in the Yukon and we need the public’s help in containing the disease,” Larke added. “People need to get screened and if they have the disease, they need to get treatment. If they have been in contact with an infected person, they may need preventative therapy.”

In a media briefing earlier today, Hemsley stressed while the two health providers are asking people to be aware of TB, they are also hoping to allay ungrounded fears. They also stressed that TB is not specific to any one community but it is presenting itself in a couple of locations throughout the Yukon.

“Sometimes people with TB are treated like lepers in their own communities. There is a stigma attached to this disease and we are trying to provide the correct information so people can respond to TB with appropriate understanding and compassion,” Hemsley said.

Tuberculosis has been around for centuries. There is historical evidence of TB deaths in the Egyptian pyramids and “White Plague” epidemics that periodically ravaged Europe and the Middle East. Tuberculosis was once called “Consumption” and “Galloping Consumption” because of the wasting effect on a person’s body.

For many years TB treatment was fresh air, lots of healthy food and rest to build up the immune system; to help “wall off” the TB germ. It wasn’t until the 1950s that effective medicines were available to treat TB.

“A person may have active TB and not know until weeks or even months later. By this time, the person may have spread it to many people, all of whom must be contacted and tested,” Hemsley said.

“Anyone can get TB. There is a greater risk of getting TB if a person lives with someone with active TB; who had TB in the past; who are very young or elderly, and who have weakened immune systems from HIV, diabetes, alcoholism, cancer or malnourishment. It can impact also those living in crowded living or homeless conditions.”

When a person breathes the TB germ into their lungs, a healthy body may be able to destroy or kill the germ thereby not getting TB. If the body doesn’t kill the TB germs, then the person is infected. A person’s body can “wall off” the TB germs and as long as their immune system is healthy and well, he/she will not be sick or able to spread the disease. If the person’s immune system is not working well, then he/she may get the active disease right away. In this case, the person will become sick and will begin spreading TB.

A person with TB may experience a cough with or without bloody sputum, chest pain, night sweats, weight loss, and tiredness.

Treatment for TB is six months in duration, but may be longer depending on a person's underlying medical conditions and the extent of the disease. The most common reason for TB treatment failure is poor compliance with the prescribed anti-tuberculosis therapy.

“Therefore, health care providers generally watch the person swallow each dose of medication. This is an effective way to help people remember their medications, decrease the chance of developing drug resistant TB and to ensure cure,” Hemsley said.

Preventative therapy, for persons who have been infected with TB (but not infectious to others) is nine months long; preventative therapy decreases the chance of the person continuing on with TB to about one percent or less. Most people have a hard time remembering medications for a few days, much less this length of time. Therefore, observed preventative therapy is the best way to assist achieving success for their ongoing health.

“The Yukon Communicable Disease Control TB program needs everyone's help in identifying persons at risk,” Hemsley said. “We ask that anyone with symptoms, or who knows of anyone with symptoms, speak with a health care professional in your community.”

The TB nurse is available Monday to Friday from 8:30 a.m. to 4:30 p.m. at 667-8323 or toll-free 1-800-661-0408, extension 8323 for more information.

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