

## **TUBERCULOSIS (TB)**

- Droplets emitted when coughing during infectious stage
- Zoonotic infection (can transfer between species)
- Most commonly affects lungs by causing tubular inflammation and eventual scar tissue that impedes respiration
- Untreated, causes protracted illness and painful deterioration involving all organ and skeletal systems until eventual death.
- **Signs and symptoms:** fever, weight loss, night sweats, coughing, chest pain, bloody expectorant
  - o If untreated, can exist in a dormant state (latent tuberculosis) until immune system compromised for another reason.
- **Medical Management**
  - o Screening skin test, chest radiograph, blood test
  - o Strict pharmaceutical regime following diagnosis for 6-12 months
- **Social and behavioural considerations**
  - o Risk factors: poor nutrition, crowded housing, poor sanitation

## **HUMAN IMMUNODEFICIENCY VIRUS (HIV)**

- A retrovirus, meaning that it reverses the usual pattern of replication by using the host's cell DNA to manufacture RNA that can be incorporated into the DNA and insinuated into healthy cells.
- Most common transmission routes: unprotected sex, receiving contaminated blood products, injection of illicit drugs, and perinatal transmission from mother to child.
- **Signs and symptoms:** flu-like, blood test required for diagnosis
  - o If not treated, can progress to HIV Stage 3 (AIDS). T helper cells can no longer defend the person from illness (symptoms include weight loss, fevers and sweats, weakness, persistent rashes or infections, opportunistic infections, memory impairment, depression, irritability, cognitive deterioration and more)
- **Cause and prognosis**
  - o With treatment quality of life can extend 15 years or more beyond diagnosis
  - o Considered chronic rather than fatal
  - o Treatment: highly active antiretroviral therapy (HAART) includes multiple drugs to stop the HIV in different points in its reproductive cycle.
    - Side effects: nausea, diarrhea, mood disorders, fevers, QoL
- **Social and Behavioural considerations**
  - o Risk of stigmatisation and isolation

## **IMPACT ON CLIENT FACTORS AND OCCUPATIONAL PERFORMANCE**

- Disease investigation clarifies the source
- Treatment to prevent spreading (confinement, all people who have been in contact should be tested)
- Fear of stigma may make people reluctant to be tested, education vital
- Preventative measures: hand hygiene, cleaning with disinfectant, covering mouth when sneezing or coughing, protected sex
- Perseverance with medication despite side effects
- Support with sharing HIV status, avoidance of potential exposure to infection
- Fatigue management