

**HSS(MD)16/2000**

To: Directors of Public Health of Health & Social Services Boards  
Directors of Nursing of Health & Social Services Boards  
Medical Directors of Health & Social Services Trusts  
Nurse Directors of Health & Social Services Trusts  
Consultant Chest Physicians  
Consultant Genito-Urinary Medicine Physicians  
Infection Control Doctors

20 June 2000

Dear Colleague

**Guidance on the Prevention and Control of Transmission of:**

- (i) HIV-related Tuberculosis**
- (ii) Drug-resistant Tuberculosis**

The enclosed report contains important information for all those involved in the prevention and control of tuberculosis. It provides detailed guidance on two areas of growing concern: drug-resistant tuberculosis and tuberculosis as it affects people with HIV infection, two subjects which are separate issues but involve similar considerations.

The guidance was prepared by a specialist sub-group of the Interdepartmental Working Group on tuberculosis. It draws on expert knowledge of tuberculosis control and HIV infection and reflects advice from consultation with over 40 relevant organisations. Locally the Tuberculosis Sub-Committee of the Regional Advisory Committee on Communicable Disease Control have recommended that this report be circulated in Northern Ireland.

Health & Social Services Boards and Health & Social Services Trusts should work together to ensure local arrangements are in place to prevent the spread of tuberculosis infection to HIV-infected individuals and from patients with drug-resistant tuberculosis in line with this guidance. This includes an accurate assessment for each hospital or health care facility of the risk of potential transmission of tuberculosis in all patient care areas.

**Key points**

The guidance provides specific advice addressed at minimising those factors that have previously been reported as having contributed to the transmission of infection and the development of drug-resistant tuberculosis:

- delay in considering the diagnosis of tuberculosis;
- delay in confirming the diagnosis;
- delay in considering and establishing drug-resistance;
- delay in starting treatment;
- treatment with inappropriate drugs (and dosages);
- default from treatment;
- lapses in isolation (e.g. inappropriate accommodation, inadequate or incorrect ventilation of isolation rooms);
- performance of aerosol-generating procedures on a patient with (sometimes unsuspected) pulmonary tuberculosis in an open ward containing immunocompromised patients.

## **Associated documentation**

General guidance on tuberculosis control and detailed guidance on the drug treatment of tuberculosis have been published separately:

- The Prevention and Control of Tuberculosis in Northern Ireland, March 1997. Department of Health & Social Services.
- Joint Tuberculosis Committee of the British Thoracic Society. Control and Prevention of tuberculosis in the United Kingdom: Code of Practice 1994. Thorax 1994; 49: 1193-1200.
- Joint Tuberculosis Committee of the British Thoracic Society. Chemotherapy and management of tuberculosis in the United Kingdom: Recommendations 1998. Thorax 1998; 53: 536-548.

General guidance on resistance to antibiotics and hospital infection control:

- Resistance to Antibiotics and other Antimicrobial Agents: HSS(MD)8/1999.
- Hospital Infection Control: Guidance on the Control of Infection in Hospitals (the Cooke Report) issued by CREST in 1997.

**The report is available on the Department of Health website at <http://www.open.gov.uk/doh/coinh.htm>.**

Yours sincerely

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**DR H CAMPBELL**  
Chief Medical Officer

**MISS J HILL**  
Chief Nursing Officer

cc Chief Executives of Health & Social Services Boards  
Chief Executives of Health & Social Services Trusts  
Consultants in Communicable Disease Control  
Regional Epidemiologist, CDSC(NI)  
Infection Control Nurses

Hidden cc

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