TO: Campus Community
FROM: Robert Pomales, Director, University Health Services
DATE: November 6, 2023
RE: Tuberculosis case diagnosed

It is a high priority for the University of Massachusetts Boston to keep the campus community informed of health issues that have been identified on campus.

Recently, the Boston Public Health Commission (BPHC) informed UMass Boston's University Health Services that a person on campus has been diagnosed with active tuberculosis (TB). The individual is currently receiving treatment and may have been infected with TB many years before developing active TB infection.

University Health Services is working closely with BPHC to minimize health risks. Approximately 39 people on campus have been identified as potentially having close contact with the person with active TB. Those people have been contacted and informed about steps they can take to protect themselves. Appropriate testing and guidance is occurring.

Although TB is a serious disease caused by a germ that is spread through the air, it is important to note that the general UMass Boston community is not at increased risk for getting a TB infection as a result of this case.

What is tuberculosis?

According to the Centers for Disease Control and Prevention, TB bacteria are spread through the air from one person to another. The TB bacteria are put into the air when a person with TB disease of the lungs or throat coughs, speaks, or sings. People nearby may breathe in these bacteria and become infected.

TB is not spread by:

- shaking someone's hand
- sharing food or drink

- touching bed linens or toilet seats
- sharing toothbrushes
- kissing

TB is not easily passed from person to person. It takes repeated and prolonged exposure in an indoor space to become infected. Common symptoms of active TB include ongoing cough, fevers, chills, night sweats, and weight loss.

It is important to note that there are two types of TB: latent and active. For most people (90 percent), TB remains dormant in the body and cannot be passed to anyone else – this is called latent tuberculosis. The remaining 10 percent develop active tuberculosis, a very serious illness if left untreated.

People who have latent TB infection can reduce their risk of developing active disease by having that infection detected and treated. People with latent TB have a 10 percent lifetime risk of developing active TB disease. It can be reduced to less than 1 percent with relatively simple and safe treatment. Even in households with a contagious (active) TB case, only about 1-in-3 close household contacts become infected, and of these, 90 percent will have latent TB and will never develop active TB.

The following websites offer additional information about TB:

https://www.cdc.gov/tb/default.htm

https://www.mass.gov/tuberculosis

University Health Services routinely screens for risk factors for TB, and it tests incoming students who are considered at risk for both active and latent TB based on American College Health Association and CDC guidelines.

Please contact University Health Services if you have any questions or concerns or would like to speak with a health care provider, by calling 617-287- 5660.

Robert Pomales

Executive Director

University Health Services