Overview

In Canada, the overall incidence rate of active tuberculosis (TB) disease was 4.7 per 100,000 in 2009. Some people still have a higher risk of becoming infected or developing the disease including people who visit or come from areas where TB is common, Canadian-born Aboriginals, and the staff and residents of shelters, long-term care facilities, hospitals and correctional centres. Smoking and exposure to tobacco smoke are important risks for tuberculosis infection and smoking increases the risk of recurrence and mortality.

The Link between Smoking and Tuberculosis

- The association between tuberculosis infection and exposure to tobacco smoke and second-hand smoke has been established since 1918.
- People who smoke have a greater chance of being infected with tuberculosis and of developing the disease.
- Continuing to smoke during the treatment of tuberculosis makes this treatment less effective.
- Smoking is associated with both recurrence and mortality from tuberculosis disease.
- More research is needed to investigate the relationship between tobacco and tuberculosis including an examination of the impact of types of tobacco products, doses and duration of smoking, and exposure to second hand smoke.

Impact

- In Canada, in 2009, foreign-born individuals accounted for 63% of all reported TB cases or 13.3 per 100,000 in Canada. The disease disproportionately affects Canadian-born Aboriginals at a rate of 27.8 per 100,000.
- It has been shown that as many as one in five deaths of patients with tuberculosis could be prevented if those patients were non-smokers.
- Children who were infected with tuberculosis have been shown to have an increased risk of developing active pulmonary tuberculosis when they are exposed to passive or second-hand smoke.

Actions

- Patients with tuberculosis require counselling and assistance to stop smoking.
- Patients with TB disease need to know that continuing to smoke will make their treatment less effective.
- Patients with TB infection or disease should be encouraged to stop smoking and avoid exposure to second hand smoke.
- The CAN-ADAPTT Guideline Development Group recommends that health care providers should:
  - Ask patients about tobacco use status on a regular basis.
  - Clearly advise patients or clients to quit.
  - Assess the willingness of patients or clients to begin treatment to quit smoking.
  - Offer assistance to every tobacco user who expresses the willingness to begin treatment to quit.
  - Conduct regular follow-up to assess response, provide support and modify treatment as necessary.
  - Refer patients or clients to relevant resources as part of their treatment, where appropriate.
Helpful Resources

- The CAMH (Center for Addiction and Mental Health) Nicotine Dependence Service <www.camh.net>
- Smokers’ Helpline <www.smokershelpline.ca>
- Stop TB Canada <http://www.stoptb.ca/index.shtml>

References