

Tuberculosis Case from Sri Lanka with Medical and Social Complications

Katie Wiggins, ORW
Iris Diaz, ORW
Jacqueline Griffin, RN
Norfolk Health Department

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Case History

- ▶ 44 year old female from Sri Lanka; has been in US since 2001
- ▶ Married to gentleman who served in Navy
- ▶ Has 12 year old daughter
- ▶ Used tobacco for 13 years; stopped in 1998
- ▶ Immunizations not up to date

History – 2

- ▶ She presented to the Norfolk Naval Hospital in Portsmouth, Virginia on 8/8/2010 with symptoms of TB
- ▶ Client received TST on 8/9/2010, result was negative.
- ▶ She remained in the hospital 18 days.

Symptoms

- ▶ Productive cough for 4 years; lost 45 pounds over a 4 month period
- ▶ Chills
- ▶ Night sweats
- ▶ Shortness of breath
- ▶ Chest pains
- ▶ Hemoptysis
- ▶ Nausea
- ▶ Rash

Chest X-Ray

- ▶ Showed cavity lesions and pleural effusions to the (l) lung (r) patchy airspace.
- ▶ Left lung entirely obliterated.

Sputum Collection

- ▶ Collected sputum on 8/9- 8/11,2010
- ▶ Culture positive for
 - *Mycobacterium Tuberculosis*
 - Complex *Mycobacterium Bovis*
 - *Mycobacterium Africanum*
- ▶ Sputum smears negative 10/12/2010.
- ▶ Conversion occurred in 8 weeks; negative on 10/14/2010

Treatment and Outcomes

- ▶ Client was started on medication 8/13/2010 while in hospital
- ▶ **R** rifamin
- ▶ **I** isoniazid
- ▶ **P** pyrazimide
- ▶ **E** ethambutal
- ▶ Client was also given **Levaquin**. Four weeks into therapy, she was still smear positive.
- ▶ Cough improved, no longer productive. Fever and night sweats resolved one month into therapy.

Treatment and Outcomes – 2

- ▶ Final cultures collected on 1/26, 1/27, and 1/28/2011; smear negative for tuberculosis.
- ▶ Provided client with 2 months of intensive **Direct Observation Therapy**, with four drugs:
 - **RIPE** and Vitamin B-6 was done 5x a week

Treatment and Outcomes – 3

- ▶ After two months of intensive **DOT Observational Therapy**, with four drugs and Vitamin B-6, she was switched to two drugs: Rifampin- 600mg, Isoniazid-300mg and Vitamin B-6 50 mg daily.
- ▶ Client transitioned to the second phase. She has had total 125 doses as of April 29, 2011.
- ▶ DOT continuing

Surgery and Outcome

- ▶ On March 10, 2011, the client underwent a left thoracotomy and pneumectomy.
- ▶ Her postoperative course was uncomplicated.
- ▶ Client arrived back in Norfolk Virginia on March 28,2011.
- ▶ Current follow-up care is at the Norfolk Department of Public Health

ORW Role in Social Issues

- ▶ Provided daily DOT
- ▶ Spoke to client on daily basis about TB treatment
- ▶ Offered encouragement
- ▶ Assisted with obtaining food for client
- ▶ Provided transportation to medical appointments

ORW Role in Social Issues - 2

- ▶ Worked with Virginia Employment Commission for housing assistance
- ▶ Provided use of State cell phone (due to lack of personal phone)
- ▶ Assisted family with getting a Safe link phone
- ▶ Purchased bus passes for client and husband

ORW Role in Social Issues – 3

- ▶ Client is currently uninsured; insurance with Portsmouth Naval Hospital expired March 22
- ▶ Client is unable to apply for ID or benefits for Medicaid and disability
- ▶ ORW assisted client and husband with obtaining a letter to be notarized for immigration; this will enable client to get identification
- ▶ Client is waiting for documentation clearance from immigration
