Transcript: TB in California

Now to one of the world's deadliest diseases, which is now forcing Long Beach, California to declare a public health emergency: this one is about tuberculosis. At least 1 person there is dead and 9 others are in the hospital because of a tuberculosis outbreak, yup, the same TB that wiped out millions by the 19th century. Long Beach's health department says that they found 14 cases of the disease at a hotel, but they estimated about 175 people have been exposed to it so far. So, TB, we looked into this and it's been on the rise since 2020! The US reported nearly 10,000 active infections last year alone. NBC News' medical contributor Dr Vin Gupta joins us now. Dr Gupta, so, alarm bells kinda go off when you see one place, a bunch of cases. This hotel, where the 14 cases where found: is that like Ground Zero here?

It is, Gadi, good evening. This is serious, tuberculosis can be anywhere in our body, but tuberculosis, in this case, likely of the lungs, is a big deal, because it can spread very rapidly to people, especially individuals who might be homeless, or have other risk factors that put them medically at higher risk. There's no surprise to see that there is this focus, this foci of 14 positive cases, multiple exposures amongst this higher risk community.

How long after an exposure does it take for the symptoms to show up? And how contagious is it?

Well, it can be very contagious, and 2 billion people across the world got it, to give you a sense, are actually infected, carrying tuberculosis in their body. A very small fraction of that actually experience symptoms and have tuberculosis disease. So, tuberculosis infection, testing positive is very common, I think that might surprise some folks, but tuberculosis disease, you actually have symptoms, far less common, less than a few million cases here in the United States over the last decade: we've seen about 10,000 cases just this year, a 16% rise. So we're seeing an upswing; but it is contagious, very infectious. The problem here is who's gonna actually demonstrate symptoms – that's when you have to be medically higher risk, or have a depressed immune system.

I'm thinking back to the last time I went to the pediatrician, I've got a 6-month at home, we've just finished his battery of vaccines, and I can't... tuberculosis wasn't on the list, I don't think. Do we do vaccines for tuberculosis here?

Not really anymore. There is a vaccine, termed BCG for short, that was given worldwide; to some degree it's still prevalent, but this is not something that's common here in the United States because it is largely not a problem – outside of places that are care deserts or in the homeless community as an example. Things to look out for for your audience: if you are medically higher risk, may have had an exposure and have had a chronic cough for about 2 weeks, unremitting fevers and night sweats – those are critical here: night sweats, a long cough, and a history of an exposure, or maybe a travel history, or if you've been recently homeless or otherwise medically higher risk, that's what you have to keep an eye out for: do you have a relevant travel history or medical history coupled with those symptoms: that's when you want to get tested.

A travel history to LA, which is where we live, along with millions of other people... is this one of those things where, if you are feeling any of those the symptoms, you go to the doctor, you gotta tell the doctor: "hey, that might be tuberculosis 'cause I saw this thing on the news", or are doctors around here, or at least in California, gonna be pretty wary and say "we're gonna test you for tuberculosis"?

You know, usually this symptom profile, a few weeks with a cough with night sweats, that usually gets the alarm bells ringing for anybody, whether or not they've been recently homeless, or have a relevant medical history, or traveled somewhere with a clear exposure: that symptom profile is something that sets off alarm bells. But your point, Gadi – everybody in the city of Los Angeles is not gonna have this exposure. Yes, this is happening in a place, in one facility where we know there is a group of people that are at a higher risk. So that makes sense to make sure that we have a high index of suspicion in a patient who might have risk factors, for either exposure or infection. That's not everybody in the city of LA, but generally speaking, if you are somebody that has had fevers, night sweats, unintentional weight loss, with a cough, that should set any clinician's alarm bells off to at least do the test.

Dr Vin Gupta, thank you.