



Tuberculosis prevention in the non-mining industries

Introduction

Tuberculosis (TB) is a major public health burden in South Africa, putting everyone including workers at risk of contracting the disease. Workers in non-mining industries where there is handling, manufacturing and production of silica-containing materials are at a potential risk of exposure to respirable crystalline silica (RCS). Inhalation of elevated levels of RCS dust makes the lungs vulnerable to TB disease. In addition, exposure to silica dust on its own, has been found to increase lifelong risk of acquiring TB disease. Workers exposed to RCS are potentially at risk of developing occupational TB as RCS dust exposure increases the risk of contracting active TB by five-fold. Silicosis and HIV increase the risk of contracting active TB by 15 times greater as compared to people without silicosis and HIV. Non-mining industries where there is potential exposure to RCS include refractories, foundries, ceramics, potteries,



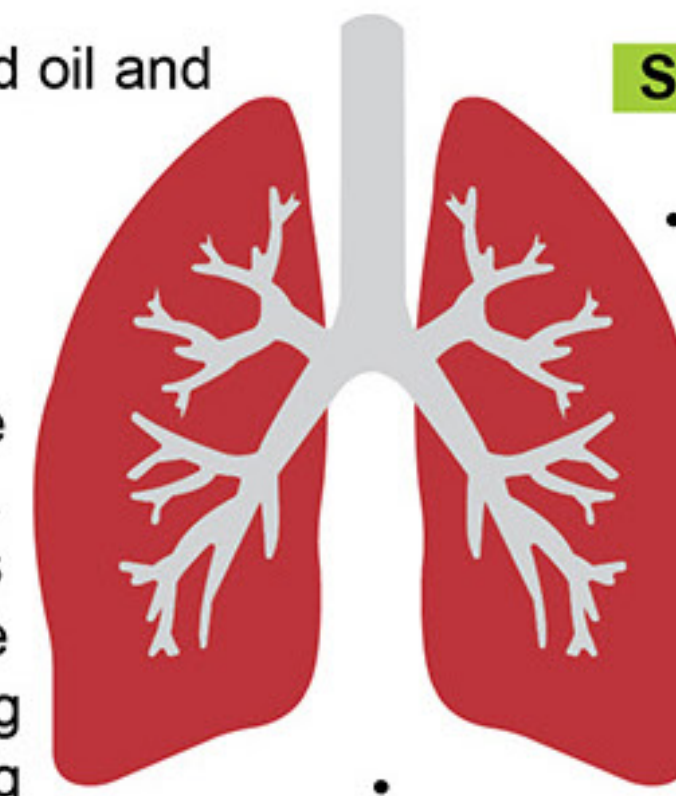
sandstone, sandblasting, construction, mining and oil and gas extraction

Control of RCS exposure

Reducing exposures to RCS dust reduces the likelihood of contracting TB in the workplace. Workplace controls should be implemented as directed by the Hazardous Chemical Substance (HCS) Regulations and best practises including elimination, substitution, training, engineering control measures and the use of respiratory protective equipment. In addition to these, prevention and management of TB can be achieved following the strategy of:

Primary Prevention

- Health risk assessment on TB and in line with the Occupational Health and Safety Act 85 of 1993 and the Hazardous Biological Agents Regulations, 2022 should be conducted
 - Employees to be educated on: TB disease, hazards related to TB, TB transmission, silica dust control measures and TB awareness, the importance of appropriate use of the correct Personal Protective Equipment and adherence to its use, stigma and discrimination in the workplace using different media and communication platforms, the rights and dignity of employees diagnosed with TB and also encourage employees to participate in TB awareness campaigns e.g. commemorate World TB day



Secondary prevention

- The employers to provide regular TB screening, through partnerships with private, public and NOT for profit organisations
 - Implement active case finding programme to promptly identify employees with TB
 - The employers to implement a TB medical surveillance programme and respiratory surveillance programme
- Employees who are diagnosed with TB should be encouraged to test for HIV
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 - If the employer is unable to provide healthcare services related to TB, the employer should encourage its employees to consult the nearest health facility as soon as they experience signs and symptoms related to TB
- Establishment of a referral system for TB treatment, care and support
- Make isoniazid prophylactic therapy accessible to workers living with HIV

Tertiary prevention

- Confirmed TB cases to be reported to the Compensation Commissioner for compensation (COIDA)
- Vocational rehabilitation

Collection of information and its utilisation

- Demographic Information of employees who are accessing workplace TB services should be documented
- Information should be analysed regularly in order to have a summary of the cases and to make sense of the data
- The results of the analysis should be communicated to top management of the factories, employee and labour

