What if I am pregnant?

This test should only be considered under your doctor's supervision, if there is a need to do so. There have not been enough studies done to clearly document the safety of the PPD solution during pregnancy. On the other hand, since TB can be passed from mother to child through the amniotic fluid during pregnancy, if you are at an increased risk of contracting TB your doctor may want you to have a TB skin test done.

Why will I receive an account?

The mantoux test is time consuming and expensive to perform. It can only be performed by clinical staff who are appropriately trained in its performance. It is essential that both the initial inoculation and the subsequent reading of the response be performed with skill and accuracy to provide a meaningful result. Considerable time and training is required to maintain a pool of staff who are capable of performing this test. The reagent used for the inoculation is expensive. The test requires two separate appointments to be made.

If the reason you are having this test is related to your current studies, clinical placement or your employment, it is not eligible for a Medicare rebate. You will receive an account for this test and there will be an out-of-pocket expense for all patients (For details of the exact cost, see our Billing Guide for Out Patients, **My Pathology Test - What will it cost?**) If you are a Pensioner, current Health Care Cardholder, a Veteran with a gold card or a resident of a Nursing Home, and the reason for the test meets the requirement for Medicare eligibility, you will be exempt from this out-of-pocket expense.

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The Mantoux Test

Information for patients

western diagnostic Pathology

The Mantoux Test

What is it and how is it used?

The Mantoux Test is a TB skin test is used to screen particular populations who are at risk of TB:

- *Healthcare workers and others whose occupations or study bring them in close contact with those who may have active TB*
- *Those who have been in close contact with someone who has an active case of TB*
- *Those with diseases or conditions that weaken their immune systems, such as those with HIV or AIDS that make them more vulnerable to a TB infection*
- *Those who come from or have lived for a period of time in a foreign country where TB may be more common*
- *Those travelling to a country with a low incidence of TB (eg USA)*

The TB skin test is used to help diagnose TB exposure. If your doctor suspects that you have active tuberculosis disease, other tests, such as chest X-rays and TB cultures, are used to confirm the diagnosis.

When is it requested?

TB skin tests are not used as a general population screen (as TB is relatively rare in Australia), but are frequently done prior to a person joining an at risk population, such as a healthcare worker.

Since TB is airborne and passed through respiratory secretions, TB skin tests may be requested when someone has been in close contact with a patient who has an active case of TB (although it is usually about 6 weeks after contact and initial infection before a positive result would emerge), or when you have been in a foreign country where TB may be more common

TB skin tests should not be done when a person has had a previous positive reaction as they are more likely to have a severe local reaction.

How is the sample collected?

No sample is required. The test is performed on the patient's skin. A purified protein derivative (PPD) solution that contains TB proteins, but not live bacteria, is used to provoke a skin reaction (a red raised bump) in those who may have been infected by TB.

Your inner forearm will be wiped with alcohol and then the skin will be let dry. You will be injected, using a 1mL syringe and a tiny needle, with a small amount (0.1mL) of PPD solution just under the first layer of your skin. The injection will form a small bubble of fluid that looks like a blister.

The site should be left uncovered and undisturbed; perfumes and other cosmetics should not be applied. It will need to be examined again at 48 and/or 72 hours to see if a local skin reaction has occurred.

What does the test result mean?

A positive result will form a red and swollen circle at the site of the injection. The size (diameter) of the swollen raised circle determines whether or not it is significant and likely due to a latent TB infection. The size that is considered positive varies with the health status and age of the individual.

Positive results may be due to a latent or active TB infection or occasionally due to a false positive. Positive results may also be seen in those who have received a BCG (bacillus Calmette-Guerin) vaccination.

Positive results must be followed up by other tests such as chest X-rays to look for signs of active TB disease. If active TB disease is suspected, sputum and other cultures may be used to confirm the diagnosis.

Negative results may mean that you have not been exposed to TB, you have a lack of skin reactivity (anergy) or that it is too early, it takes about 6 weeks after infection before a positive test can be determined. If your doctor wants to confirm a negative result they may repeat the TB skin test.

What else I should know?

If you have had a positive TB skin test, usually you should not have another one done. A positive will remain positive and the skin reaction of any subsequent TB skin tests may become increasingly severe. Even a negative test may still result in moderate pain, itching, or redness.