

I-TB NE-HIV

Ukuba uphila neHIV kwaye unayo neTB, kuthiwa wosuleleke kabini. I-TB sesinye sezona zifo zixhaphakileyo ezithi zosulele abantu abaphila neHIV. Xa umthamo wentsholongwane uphezulu abe namajoni omzimba wakho ebuthathaka, maninzi amathuba okuba ungosuleleka yiTB. Kodwa, ukuba uyewaqalisa ngonyango (ngetritment) lwakho lweHIV nje ukufumanisa kwakho ukuba uneHIV uze uzinikele kwii-ARV – uzakwehla umthamo wentsholongwane aze namajoni omzimba wakho nawo omelele abesempilweni – amathuba okosuleleka yiTB angancipha. Ukusela unyango lothintelo lweTB ndawonye nee-ARV kungawunciphisa nangakumbi ubungozi bokufumana iTB.

I-TB EXGATHISAYO KUMACHIZA (MDR-TB KUNYE NE-XDR-TB)

Ukuba awuzinikeli kunyango lwakho; ukuphosa okanye ukuqakatha ekuseleni amayeza, okanye ukungawaseli amanye wamayeza owayalelweyo, intsholongwane yeTB esezimbeni wakho izakufund' indlela yokuphephana namayeza owasebenzisayo wokunyanga iTB ixhathise inganyangeki. Oku kuthetha ukuba unyango alusayi kusebenza ekubalaleni iintsholongwane zeTB uze ke ubeTB eXhathisayo kuMachiza.

Zimbini iindidi zeTB elwisana namachiza, iTB exhathisa kwingqokelela yamachiza (MDR-TB) kunye neTB exhathisa kumachiza aluqilima (XDR-TB). Ezi zezona ndidi zeTB zinobungozi kakhulu kwaye zisenokugqithiselwa nakwabanye abantu. Yiloo nto abantu abaninzi bosuleleke yiDR-TB (iTB eXhathisayo kuMachiza).

Kunzima kakhulu ukunyanga iMDR-TB kunye neXDR-TB, unyango lungathatha kangangeenyanga ezilithoba ukuya kwiminyaka emibini, okanye nangaphezulu kwaye lunemiphumela enobuzaza kakhulu. Ukuzinikela kubalulekile ukuze unyango lusebenze. Oonompilo bazakuthatha izigqibo malunga nokuba unyango lwe-LTBI luyafuneka kusini na kwigulane ezisesichengeni sokudibana neTB exhathisayo.

UKUTHINTELA UKUSASAZEKA KWE-TB

Ukuze kuncitshiswe amathuba okufumana intsholongwane yeTB, la manyathelo alandelayo kufuneka ethathiwe apho kukho imfuneko khona:

- Zivule qho iifestile endlini yakho, kwizakhiwo kizawonke-wonke nakwithuthi zikawonke-wonke ukwenzel' ukuba kuhlale kungena umoya ococekileyo.
- Hlala uzogquma qho ukhohlela okanye uthimla nokuba usebenzise ingalo yakho okanye ngelaphu. Ungakhohleleli ezandleni zakho. Ukuba ukhohleleli ezandleni zakho, kufuneka uzihlambe qho.
- Abantu abaneTB kufuneka:
 - Balale bodwa, kwiigumbi eliwungenisa ngokwaneleyo umoya;
 - Bafake imaskhi (isigqubutheli) xa bekunye nabanye abantu; kwaye
 - Bangahlali xesha lide kwiindawo ezinabantu abaninzi.

Uluhlu lwamanqaku ashicilelweyo e-'Zenzele – Ukuphila ne-HIV' aquka ezi ncwadana zilandelayo:

	1 UNYANGO	
	2 UKUVAKALISA IMEKO	
	3 UKUBAMBELELA	
	4 PMTCT	
	5 UTHANDO NE-SEX	
	6 ZONDLO NENDLELA YOKUPHILA	
	7 ULUTSHA OLUFIKISAYO NE-HIV	
	8 UKUGUGA NE-HIV	
	9 UKWAZI MALUNGA NE-TB	
	10 WELCOME BACK	

UKUFUMANA UNGEDO NENKXASO

Ukuba uphila ne-HIV, awuwedwa. Usenokulufumana uncedo nenkxaso oyidingayo xa uyicela. Mininzi imibutho ekunxulumanisa simahla nabacandisi abanamava nabafumaneke imini yonke, liyure ezingama-24.

Umnxeba we-AIDS 0800 012 322
 Iziko loNcedo kuBundlobongela ngokweSini 0800 428 428
 Umnxeba weeNgcebiso we-Lifeline 0861 322 322
 Umnxeba weeNgxaki zokuFun' ukuzibulala 0800 567 567
 OwaBantwana (abangaphantsi kweminyaka elishumi elinesixhenxe) 0800 055 555
 Umnxeba wokuXhathazwa kweZiyobisi 0800 12 13 14
 i-MomConnect *134*550#

Ukuba ufuna iinkonzo zokunika inkxaso malunga neHIV naphi na apha eMzantsi Afrika, yiya ku-www.healthsites.org.za ukuze ufumanise ngeqela elinika inkxaso kwindawo ohlala kuyo.

Malunga nokufumana iqela elinika inkxaso, yiya ku-BrothersforlifeSA okanye ku-ZAZI. Usengaya naku-www.brothersforlife.mobi okanye ku-www.zazi.org.za

Usenokuzifumana iinkcukacha ezithe vetshe malunga nokuphila ne-HIV nakwamanye amaphetshana eenkcukacha woluhlu lwakwaZenzele.



UKWAZI MALUNGA NE-TB

9 UKUPHILA NE-HIV: UKWAZI MALUNGA NE-TB

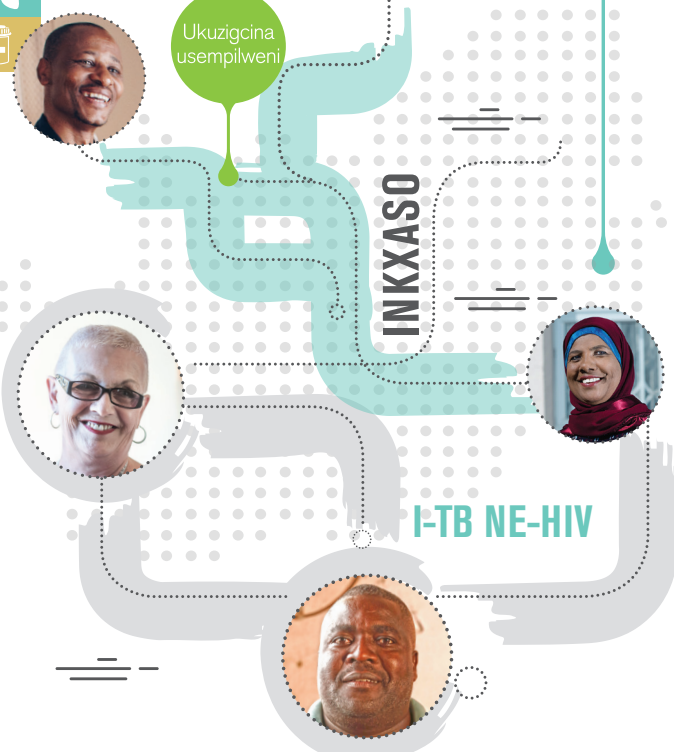
Ukuzinikela kwii-ARV



Ukuzigcina usempilweni

INKXASO

I-TB NE-HIV



UHLASELO LWEESELI ZE-CD4



I-HIV EMZIMBENI

I-HIV yintsholongwane eyenza amajoni omzimba abebuthathaka, la akhusela umzimba wakho kusuleleko nakwizifo. Xa amajoni akho omzimba ebuthathaka, umzimba wakho uthi ungakwazi ukulwa nosuleleko kunye nezifo. Ukuba i-HIV ayinyangwa ngee-ARV, usenokuhlaselwa yingqokelela yezifo ezibizwa ngokuba nguGawulayo (i-AIDS).

AMAJONI OMZIMBA ENZIWE EBUTHATHAKA



UKUFUMANA UNYANGO LWE-HIV

Unyango olulwa nolwamvila lwentsholongwane kaGawulayo, iiARV, ngamayeza ekungawona kuphela akwaziyo ukulawula i-HIV. Ukuzinikela – uzisele ii-ARV njengoko uyalelwe ngunompilo – kunciphisa umthamo weHIV emzimbeni: ubalo lwe-CD4 luyenyuka aze namajoni omzimba olulame. Oku kubizwa ngokuba kukuDodobaliswa kwentsholongwane. Oku akuthethi ukuba i-HIV sele inyangekile, kuthetha ukuba kukho nje intwana ye-HIV egazini, nokuba uzakuba nokunandiphela impilo engcono, kwanokuba mancinci amathuba okuba i-HIV ungayigqithesela komnye umntu.

UKUDOBALISWA KWENTSHOLONGWANE



SIYINTONI ISIFO SEPHEPHA?

Isifo sephepha okanye i-TB njengoko isaziwa, sisifo esibangelwa yintsholongwane ebinza ngokuba yiMycobacterium tuberculosis ethi ingene emzimbeni ngomoya kwaye idla ngokuchaphazela imiphunga. Ithi isasazeka emoyeni xa lowo oneTB ethimla, ekhohlela, ethetha, ethsica, okanye ecula. Nabani na ophefumelelela umoya ngaphakathi angayifumana iTB. Sisifo esibonuzaza kakhulu kodwa sisenganyangeka.

Le ncwadana ixhaswe siSivumelwano soBambiswano esinguNombolo GH001932-04 esuka kumaZiko aseMelika okuLawula nokuThintela iZifo. Okuqulethwe apha kuluxanduva lwababhali kuphela kwaye akuthethi ukuba kumele izimvo US Centres for Disease Control and Prevention, iSebe lezeMpilo neeNkonzo zoLuntu, okanye urhulumente waseMelika.



Ekuqaleni ngandiwasele amayeza eTB naweOHIV. Ndandivele ndiphume irhashalala. Kwakude kubengathi ulusu olu lwam luyayucuka. Iinyawo zam zirhawuzelele umphantsi lo wazo. Ndandingakwazi ukunxiba izihlangu. Naxa iphavmenti le itshisa bhee mna ndandingeva nento le nangona kodwa kwakuvakala xa ndinyathele phezu kwelintye nje elincinci, itsho ngeyona ntlungu ionganyamezelekiyo. Kodwa ndaqalisa ukubuyisa emzimbeni. Ndaziva ndindim kwakhona. Ndandisele ndiyigqibile itritment yam yeTB kodwa ndaqhubeka nee-ARV.”



Thomas Mashego

IIMPAWU NEMIQONDISO EQHELEKILEYO YE-TB IQUKA:

- Iimpawu nemiqondiso eqhelekileyo ye-TB iquka:
- Ukukhohlela okuthatha iiveki ezintathu okanye ngaphezulu ude maxa wambi ukhohlele igazi;
 - Amahlaba esifubeni;
 - Ukwehla emzimbeni ngesaquphe;
 - Ukuziva udiniwe kakhulu;;
 - Ifiva;
 - Ukubila ebusuku;
 - Ingqele;
 - Ukungakucaceli ukudla.

WAZI NJANI UKUBA UNE-TB?

Ayinguye wonke umntu othe wafumana iTB othi abonakalisa iimpawu zayo. Ukuze ufumanise ukuba unayo kusini na, kuzakufuneka uyokuhlolwa eklini. Xa uhlolelwa iTB kuzakucelwa izikhohlela/umkhwinya wakho ozakuthi uhlolwe elebhu ukuba unazo kusini na iintsholongwane zeTB. Ukuba kufunyenwe iintsholongwane zeTB kwizikhohlela zakho, uzakuthi uqalise ngonyango lweTB. Ngamanye amaxesha kuyekuthathwe ix-ray ukuze babone ukuba ikhona kusini na iTB emiphungeni.

LUYINTONI UNYANGO LOTHINTELO LWE-TB KWAYE KUTHENI KUFANELE NDILOSELE?

Unyango loThintelo lweTB lunyango oluselwa yiPLHIV ukuze kuthintelwe ukunwenwa kwesifo seTB. Ukuselwa konyango lothintelo lweTB kuzakunciphisa amathuba okubaneTB kwanokuguliswa yiyo. Bonke abantu abaphila neHIV basemgciphekweni omkhulu wokuba neTB kwaye kufanele basele unyango lokuthintela iTB oluyinxalenye yonakekelo olupheleleyo phantsi kweliso likanompilo oemthethweni.

LOLUPHI UNYANGO LOTHINTELO LWE-TB ONOKUKHETHA KULO?

I-Isoniazid okanye i-INH lolona Nyango loThintelo lweTB olusetyenziswayo eMzantsi Afrika. Isebenza ngeyona ndlela incomekayo ekuthinteleni iTB kodwa kufuneka iselwe qho ngosuku kangangeenyanga ezi-6 ukuya kwezili-12. Isoloko ihambisana novithamin B6. Akhona amayeza amatsha aluNyango loThintelo lweTB angala, 3HP, esetyenziswa endaweni ye-INH ebantwini abadala nasebantwaneni. i-3HP iselwa Kanye ngeveki kangangeveki ezili-12. I-Isoniazid eselwa ndawonye ne-rifampicin eselwa kangangeenyanga ezi-3 (3RH) yeyona enconywayo ebantwaneni nakwabo bafikisayo abangaphantsi kweminyaka eli-15. Yiya kwiziko lempilo/kwikliniki ekufutshane nawe ukuze uqalise ngonyango lokuthintela iTB.

UNYANGO LWE-TB

I-TB isenganyangeka kwaye iphele tu ngokuthi usele ii-antibhayothikhi ezibulala iintsholongwane zeTB, kangangeenyanga ezintandathu ukuya kwezilishumi elinambini. Oku kuquka inkqubo yonyango eluqilima eselwa kwiinyanga ezimbini zokuqala kusetyenziswa amayeza amane awohlukileyo: i-isoniazid, i-rifampicin, i-pyrazinamide kunye ne-ethambutol; uze uqhubeke nonyango iinyanga ezine ezilandelayo usela i-isoniazid kunye ne-ethambutol. Unompilo wakho uzakukuxelela ukuba ulusela njani na unyango lwakho lwe-TB nolwee-ARV. Kubalulekile ukusela unyango lwakho njengoko uchazelwe ngunompilo uze uye eklini kutyelelo lolandelelo. Nokuba sele uziva ubhetele emva kokuba uqalisile ngonyango lweTB, kufuneka ulugqibile lonke. Unompilo wakho uzakukuxelela ukuba ungaluyeka nini na unyango. Ungaluyeki unyango lwakho de kube kutsho unompilo wakho.

IMIPHUMELA YONYANGO LWE-TB

- Unyango lweTB lunemiphumela olunayo, kodwa idla ngokukhawuleza iphele emva kweevekana nje zokuqala. Imiphumela eqhelekileyo yamachiza eTB yile:
- Ukuva ngathi uzakugabha;
 - Ukuba nesiyezi;
 - Irhashalala;
 - Ukuva ngathi uhlatywa ziinaliti okanye ukutshisa ezinyaweni;
 - Ukungakucaceli ukudla;
 - Ukuziva ngathi unomkhuhlane okanye ifiva;
 - Ukuba ungomnye wabantu abambalwa abathi babenamhlo okanye ulusu olutyheli (inyongo); bonana nogqirha ngoko nangoko.