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Tuberculosis deaths 2019 america

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Tuberculosis, also called tuberculosis, is an infection caused by bacteria. Tuberculosis usually affects the lungs. But it can also affect other parts of the body. This can include the joints, bladder, spine, and brain. There are 2 types of TB: Latent or inactive TB: Bacteria are present in the body, but it does not make you sick or contagious. Your immune system protects your body from bacteria. You are not able to spread the disease. Active tuberculosis: Bacteria are present and cause symptoms. Your immune system has not been able to fight them. You may be able to spread the disease. If not treated properly, tuberculosis can be fatal. Symptoms will depend on what area of the body is affected. Usually tuberculosis affects the lungs. Symptoms of active tuberculosis in the lungs include: Bad cough, which lasts 3 weeks or more Coughing up blood or sputum (mucus from the depths of the lungs) Chest pain Fever Fatigue Loss appetite Unintentional weight loss Chills Night sweats If TB affects the joints, may develop pain that feels like arthritis. If tuberculosis affects the bladder, it can hurt to go to the bathroom and there may be blood in the urine. TB of the spine can cause back pain and paralysis of the legs. TB of the brain can cause headaches and nausea. You will not have any symptoms of tuberculosis unless you have active tuberculosis. Tuberculosis is caused by bacteria. Bacteria spread through the air from one person to another. Bacteria enter the air when a person with active tuberculosis in the throat or lungs speaks, laughs, sneezes or coughs. Anyone who is nearby can then breathe this air and breathe bacteria. Then get infected. TB bacteria spread only in the air. You can't get TB by: Shaking someone's hand. Sharing food or drink. Splitting the toothbrush. Touching something that an infected person has touched. After inhaling bacteria, they settle in the lungs and begin to grow. Sometimes bacteria move from the lungs to other areas of the body. This may include the kidneys, spine, and brain. In case of active infection of the lungs or throat, the patient is contagious. This means that you can spread the disease to other people. When the disease occurs in other parts of the body, and not in the lungs or throat, it usually can not be spread. It is not easy to get tuberculosis. Usually you need to be close to a person who has active tuberculosis for a long period of time. It usually spreads between family members, close friends and people who live or work together. You are at a higher risk of tuberculosis infection if you are in close contact with others who are infected. If you become infected, you are at greater risk of developing an active tuberculosis disease if you have a weakened immune system. This may include: Infants and young children People with chronic diseases such as diabetes People with HIV/AIDS Recipients of organ transplants Patients with undergoing chemotherapy The most commonly used method of checking tuberculosis is a skin test. Blood tests can also be If you have a positive skin test or blood test, it means that you have been exposed to tuberculosis. You have been infected with bacteria that cause the disease. The test does not indicate whether you have a latent tuberculosis infection or if you have an active tuberculosis disease. If your skin test is positive, you will probably have a chest X-ray and a physical examination. This will tell your doctor if you have active tuberculosis and are able to spread the disease to others. If I have a positive skin test, do I have active tuberculosis? Usually not. A person can be infected with bacteria that cause tuberculosis, but in fact they do not have active tuberculosis. Of those infected with bacteria, only a few (about 10%) develop active tuberculosis. Healthy people who become infected with tuberculosis bacteria are often able to fight off infection. They do not develop active tuberculosis. Bacteria are dormant (inactive) in the lungs. If the body is not able to stop the infection, and the bacteria continue to grow, active tuberculosis develops. This can happen many years after infection. It usually happens when something causes a weakening of the immune system. Do I know if I am developing active tuberculosis? There is a small chance that active tuberculosis may develop and I do not know. Bacteria can grow in the body without making you feel sick. However, most people who have active symptoms of tuberculosis. The best way to prevent tuberculosis infection is to avoid close contact with a person who has an active tuberculosis disease. If you are infected with tuberculosis, but do not have an active tuberculosis disease, you can take a drug to prevent the development of the disease. This is called prophylactic therapy. This treatment is usually a dose of daily medicine taken for 6 to 9 months. If you carefully follow the doctor's recommendations, you will not develop tuberculosis disease. There is a vaccine against tuberculosis. It is used in other countries where tuberculosis is more common. It is not often used in the United States because the chances of tuberculosis infection are low. Tuberculosis is treated with antibiotics. The medicine recommended by your doctor will depend on a number of factors. These include your age, your health, whether tuberculosis is active or latent, and whether your tuberculosis is drug-resistant. This means that some drugs will not work on it. The patient must take drugs with tuberculosis for 6-9 months. Your doctor will tell you exactly how and when to take the medicine and for how long. It is very important to follow your doctor's instructions. Take this medicine at the same time each day. Do not skip doses or stop taking the medicine. This can make the treatment of tuberculosis more difficult. What drugs are used to treat tuberculosis? Typical drugs used to treat tuberculosis include: Isoniazide Rifampin Ethambutol Pyrazinamide Depending on the doctor's recommendations, the patient may take 1 or more of these medications. These drugs usually do not cause side effects. Tb drugs can damage the liver. Do not drink alcohol or take paracetamol (one brand: Tylenol) while taking medication for tuberculosis. Alcohol and paracetamol may increase the risk of liver problems. Always contact your doctor before taking any other medicines. Some medicines interact with tuberculosis medications and may cause side effects. Your doctor may want to monitor you every month while taking these medicines. For example, you may need to visit your doctor for tests to get another prescription, and check for any side effects or problems. Although the side effects associated with the drug for tuberculosis are not common, they can be serious. You should immediately contact your doctor if you experience any of these symptoms: Nausea vomiting Abdominal pain, tenderness or soreness Blurred vision or color blindness Dark (coffee-colored) urine Fever that lasts 3 days or more Jaundice (yellowing of the skin and whites of the eyes) If you have active tuberculosis disease, it will take several weeks of treatment before they are no longer contagious. Until then, it is important to take steps not to spread bacteria. Take the medicine exactly as your doctor tells you to. Every time you cough, sneeze or laugh, cover your mouth with a tissue. Place the tissue in a closed bag before ejection. Avoid close contact with other people. Sleep in the bedroom yourself. The air from the room often so bacteria do not stay in the room. Don't go back to work or school until your doctor tells you it's okay. If active tuberculosis disease occurs, medical monitoring may be necessary for the rest of your life. This may include regular check-up scans and possibly some chest X-rays. This is done to make sure you stay free of tuberculosis, even after taking a full course of the drug for tuberculosis. How do I have tuberculosis? I work in a hospital. Should I tell my manager that Maybe I got tuberculosis at work? What treatment is best for me? Will active tuberculosis develop? If my symptoms get worse, when should I call my doctor? Is it safe for me to be around my family? Is there anything I can take to get my cough gone? I'm on other drugs. What drugs can be safely taken with drugs for tuberculosis? How often will I have to go to the doctor? Will my tuberculosis ever be cured? Copyright © American Academy of Family Physicians This information provides a general overview and may not apply to everyone. Talk to your GP to find out if this information applies to you and get more information about it. The death penalty, also known as the death penalty, is the government-sanctioned execution of a person sentenced to death by a court as punishment for a crime. Crimes that can be punishable by the death penalty are known as capital offences and involve serious such as murder, sexual rape, child rape, child abuse, terrorism, treason, espionage, incitement, piracy, plane hijacking, drug trafficking and drug trafficking, war crimes, crimes against humanity and and Currently, 56 countries, including the United States, allow their courts to impose the death penalty, while 106 countries have passed laws that abolish it altogether. Eight countries sanction the death penalty in special circumstances, such as war crimes, and 28 countries have abolished it in practice. As in the United States, the death penalty is a matter of controversy. The United Nations has now adopted five non-binding resolutions calling for a global moratorium on the death penalty, calling for its eventual abolition worldwide. While most countries have abolished it, more than 60% of the world's population lives in countries where the death penalty is allowed. China is believed to carry more people than all other countries put together. While the death penalty has been an integral part of the U.S. judicial system since the colonial period, when a person can be executed for crimes such as witchcraft or grape theft, the modern history of American execution has been shaped largely by a political response to public opinion. Between 1977 and 2017 - the last year available from the U.S. Bureau of Justice Statistics - 34 states executed 1,462 people. The Texas correctional system accounts for 37% of all executions. While all 10 states allowed the death penalty in the late 1960s and an average of 130 executions per year were carried out, the public strongly opposed the death penalty. Several other nations dropped the death penalty in the early 1960s and legal authorities in the U.S. began to question whether the executions constituted cruel and unusual punishments under the Eighth Amendment to the U.S. Constitution. Public support for the death penalty reached its lowest level in 1966, when a Gallup poll showed that only 42% of Americans approved of the practice. From 1967 to 1972, the U.S. observed what constituted a voluntary moratorium on executions as the U.S. Supreme Court grapple with the case. In several cases that have not been directly tested by its constitutionality, the Supreme Court has modified the use and use of the death penalty. The most important of these cases concerned the jury in capital matters. In the 1971 case, the Supreme Court upheld the jury's unlimited right to both determine the guilt and innocence of the accused and to impose the death penalty in a single trial. In 1972 in Furman v. Georgia, the Supreme Court issued a 5-4 decision effectively striking down most federal and state death penalty laws declaring them arbitrary and capricious. The court ruled that the death penalty legislation, as written, violated the cruel and unusual punishment of the Eighth Amendment provision and the guarantees of due process of the Fourteenth Amendment. As a result of Furman v. Georgia, with more than 600 prisoners sentenced to death between 1967 and 1972, has been commuted. Supreme Court decision in Furman v. Georgia has not ruled that the death penalty itself is specific provisions to which it has been applied. In this way, states quickly began to write new rules on the death penalty in order to comply with the court's decision. The first of the new death penalty laws created by the states of Texas, Florida and Georgia has given courts greater leeway to use the death penalty for specific crimes and provides for a current forked-out trial system in which the first trial determines guilt or innocence and the second trial determines the punishment. Texas and Georgia law allowed the jury to decide on the punishment, while Florida law left the sentence to the trial judge. In five related cases, the Supreme Court upheld various aspects of the new death penalty legislation. In these cases: Gregg v. Georgia, 428 U.S. 153 (1976)Jurek v. Texas, 428 U.S. 262 (1976)Proffitt v. Florida, 428 U.S. 242 (1976)Woodson v. North Carolina, 428 U.S. 280 (1976)Roberts v. Louisiana, 428 U.S. 325 (1976) As a result of these decisions, 21 states threw out their old mandatory death penalty laws, and hundreds of death row inmates changed their life sentences in prison. On January 17, 1977, convicted murderer Gary Gilmore told a shooting squad in Utah: Let's do it! and became the first prisoner since 1976 executed under new death penalty laws. A total of 85 prisoners - 83 men and two women - were executed in 14 US states in 2000. As of January 1, 2015, the death penalty has been legal in 31 states: Alabama, Arizona, Arkansas, California, Colorado, Delaware, Florida, Georgia, Idaho, Indiana, Kansas, Kentucky, Louisiana, Mississippi, Missouri, Montana, Nevada, New Hampshire, North Carolina, Ohio, Oklahoma, Oregon, Pennsylvania, South Carolina, South Dakota, Tennessee, Texas, Utah, Virginia, Washington and Wyoming. Nineteen states and the District of Columbia have abolished the death penalty: Alaska, Connecticut, the District of Columbia, Hawaii, Illinois, Iowa, Maine, Maryland, Massachusetts, Michigan, Minnesota, Nebraska, New Jersey, New Mexico, New York, North Dakota, Rhode Island, Vermont, West Virginia and Wisconsin. Between 1976 and 2015, executions were carried out in thirty-four states. From 1997 to 2014, Texas ran all state's death penalty laws, executing a total of 518 executions, far ahead of Oklahoma's 111, Virginia's 110 and Florida's 89. Detailed statistics on executions and the death penalty can be found on the website of the Bureau of Justice Statistics. Website.

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