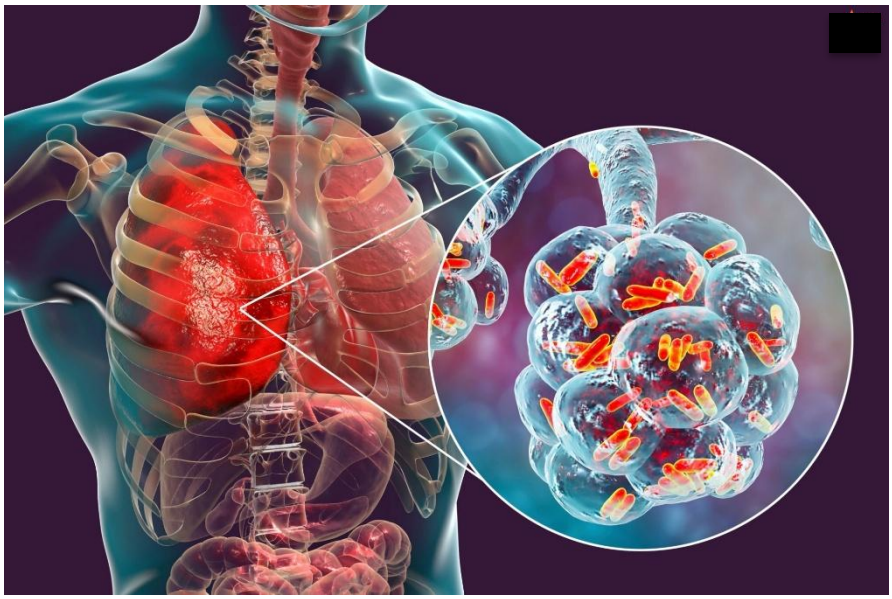
MyICID Public Health Advisory

28 February 2026

Understanding Tuberculosis (TB) and the Right Ways to Protect Yourself



Malaysian Society of
Infection Control & Infectious Diseases
(MyICID)

The Malaysian Society of Infection Control and Infectious Diseases (MyICID) takes note of recent reports regarding an increase in tuberculosis (TB) cases across the country, which have understandably caused public concern. While vigilance is important, our response must be guided by **scientific evidence** rather than fear.

Recently, there have been calls for the public to adopt “universal masking” — the practice of everyone wearing face masks at all times in public spaces — as a measure to prevent the spread of TB. However, this approach is not supported by established TB control principles. Notably, the World Health Organization (WHO) and public health experts do not recommend universal masking for TB control in the community.

The Current TB Situation in Malaysia

TB is an endemic disease in Malaysia, meaning it has always been present in the community. According to the Ministry of Health (MOH) Malaysia, as of Epidemiological Week 6, 2026, a cumulative total of 3,161 TB cases has been reported nationwide, with localized increases observed in states like Sabah, Selangor, and Sarawak. Based on historical MOH and WHO incidence data, Malaysia's national incidence rate has remained relatively stable at approximately 70 to 80 cases per 100,000 population over the last few years.

While the MOH is actively managing these localized clusters through aggressive contact tracing and screening, the situation **does not warrant alarmist reactions** or a return to pandemic-era universal masking.

Why Universal Masking is Not the Solution for TB Prevention?

TB and COVID-19 are very different diseases and require different preventive approaches.

TB requires prolonged exposure:

TB is spread through the air, but the transmission is slow. You generally need to share an enclosed, poorly ventilated space with an infectious person for a **prolonged period** (hours or days) to inhale enough bacteria to become infected. Casual, brief contact in a grocery store or walking past someone on the street carries an extremely low risk.

Standard masks do not reliably protect against inhaling TB:

For healthy individuals, wearing a standard surgical or cloth mask in public **does not provide effective protection** against the microscopic airborne droplet nuclei that transmit TB. Multiple studies and infection-control guidelines have demonstrated that surgical masks lack both the filtration efficiency and the tight facial seal required to prevent inhalation of TB-containing aerosols. Their primary role is source control — reducing the release of infectious aerosols from individuals with active pulmonary TB — rather than protecting the wearer from airborne exposure.

Effective personal protection against airborne TB requires a properly fitted, medical-grade N95 respirator (or equivalent particulate respirator), which is typically recommended in high-risk environments such as healthcare settings where the risk of airborne infection is significant. Outside these settings, routine use of such respirators by the general public is neither medically necessary nor practical.

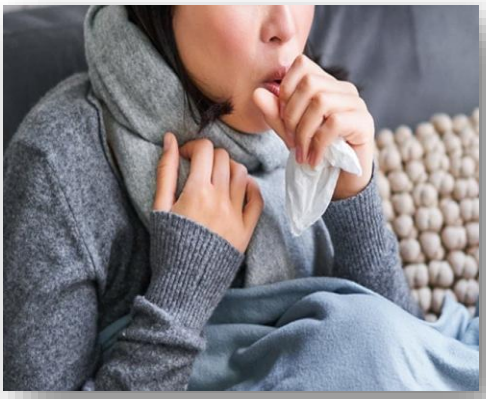
It creates false security and stigma:

Relying on universal masking ignores the actual root of the problem — **delayed diagnosis**. It also risks heavily stigmatizing the disease, which discourages people who are sick from coming forward to get tested.

The Right TB Preventive Tools: What You Should Do

The WHO's End TB Strategy emphasizes that the most powerful way to protect the community is by finding and curing the disease at its source. Here are the most effective actions you can take:

1. Seek Early Diagnosis (Do not ignore a prolonged cough)



A cough is your body's warning sign. If you or a family member has a **cough lasting more than two weeks, unexplained weight loss, night sweats, or fever**, see a doctor immediately. Explicitly ask for a sputum test and a chest X-ray. Early detection is the single best way to stop TB from spreading.

2. Complete Your Treatment

TB is entirely curable. If diagnosed, treatment is free at government clinics. However, it requires taking antibiotics daily for at least 6 months. **Do not stop taking your medication** just because you feel better. Stopping early causes the bacteria to mutate into dangerous, drug-resistant TB. Most patients become completely non-infectious within the first two to three weeks of proper treatment.

3. Improve Indoor Ventilation

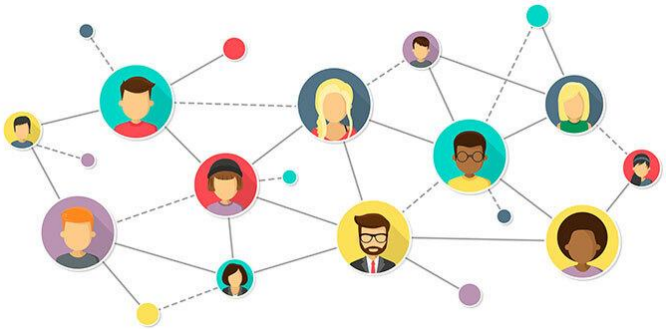
Because TB bacteria build up in stagnant indoor air, environmental control is a highly effective shield. Open windows and doors at home and in workplaces to allow fresh air to circulate. Let natural sunlight in, as UV light naturally kills airborne TB bacteria.

4. Practice Targeted Masking and Cough Etiquette

While universal masking is not needed, **targeted masking** is highly effective.

- If you are sick with a cough or respiratory symptoms, wear a surgical mask to **catch your droplets and protect others.**
- Wear a mask if you are visiting high-risk settings like a crowded hospital waiting room or a poorly ventilated, densely packed indoor event.

5. Participate in Contact Tracing



If someone in your household or workplace is diagnosed with TB, cooperate fully with the District Health Office (PKD). They will test you and, if necessary, provide Tuberculosis Preventive Treatment (TPT) to stop any latent bacteria from developing into an active illness.

TB is both preventable and curable. By relying on evidence-based public health measures and seeking prompt medical care for prolonged symptoms, we can effectively reduce transmission and protect our communities together.

References:

1. World Health Organization. "4. Respiratory protection." *WHO TB Knowledge Sharing Platform*, 2023. https://tbksp.who.int/en/node/2591
2. Bollinger, N. J., Bryant, J., Flesch, J. P., Hodous, T. K., Martin, L., Petsonk, E. L., & Ruch, W. E. (1999). *TB respiratory protection program in health care facilities: Administrator's guide* (NIOSH Publication No. 99-143). U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Institute for Occupational Safety and Health. https://www.cdc.gov/niosh/docs/99-143/default.html

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