European Respiratory Society Annual Congress 2012

Abstract Number: 1935

Publication Number: P2667

Abstract Group: 10.2. Tuberculosis

Keyword 1: Tuberculosis - management Keyword 2: Epidemiology Keyword 3: Public health

Title: Impact of social of social risk factor on treatment outcome in patients with culture positive pulmonary tuberculosis (CPPTB)

Dr. Izabela 15025 Siemion-Szczesniak i.siemion@igichp.edu.pl MD ¹, Prof. Maria 15026 Korzeniewska-Kosela m.korzeniewska@igichp.edu.pl MD ² and Prof. Dr Jan 15027 Kus j.kus@igichp.edu.pl MD ¹. ¹ 1st Department of Pulmonary Diseases, National TB and Pulmonary Diseases Research Institute, Warsaw, Poland and ² Department of Epidemiology, National TB and Pulmonary Diseases Research Institute, Warsaw, Poland .

Body: Objectives: The aim of the study was to evaluate the impact of social risk factors on treatment outcome among culture-positive patients treated for active pulmonary tuberculosis (PTB). Material and methods: We retrospectively reviewed all medical records of patients notified in 1995 and 2000 in three separate districts in Poland in years 1995 and 2000. The relation between both alcohol abuse and homelessness and poor treatment outcome was evaluated. Treatment outcome was categorized as: cured, treatment completed, treatment defaulted, treatment failure. Results: 708 patients with culture positive PTB were included to the study (373 in 1995 and 335 in 2000). There were 85 patients with risk factors in 1995 and 101 patients in 2000. 80 of participants in 1995 and 69 in 2000 abused alcohol, 5 and 32 were homeless, respectively. Among alcohol abusers treatment success rate were 45.1% in 1995 and 53,6% in 2000. Among patients not abusing alcohol treatment success rates were 63,8% and 54,1%, respectively (p=0.005 in 1995 and p= 0.0186 in 2000). In 1995 40% of homeless patients had succeeded treatment, while the rate of treatment success among non-homeless was 60%. The difference was not statistically significant (p=0.6532) probably because of small number of homeless patients. In 2000 treatment success rate among homeless participants was 25% and among non-homeless 57,1%, which was highly statistically significant (p=0.001). Conclusions: Alcohol abuse and homelessness were associated with no success of treatment outcome among patients with PTB. Interventions to improve treatment adherence in patients considered to be at risk for default are necessary.