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Title: Association between smoking and pulmonary tuberculosis

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Body: Background: Tobacco smoking and tuberculosis (TB) are two major public health problems. It has long been suggested that tobacco smoking may affect rates of TB morbidity and mortality. Methods: To assess the clinical features of tuberculosis in smoker's patients, we report a comparative study between two groups of 41 patients each with active pulmonary tuberculosis. Mean age in smokers group was 40, 4 ± 15, 7 years vs 40, 19 ±13, 6 years in non smoker's group. 39 of smokers were men with tobacco intoxication about 33, 7 ± 27, 62 Package per year. In no smoker's group, there were 21 men and 20 women. Symptoms were no specific in both groups and dominated by cough (80% vs 66%), hemoptysis (19, 5% vs 6%) and chest pain (15% vs 20%). Radiological investigations showed bilateral lesions in 21 cases (51, 2%) versus 10 cases (24%). Nodular infiltration was showed in 22 versus 14 cases, consolidation in 10 versus 3 cases, a mass lesion in 1 case in smoker's group and cavitary lesions in 8 versus 13 cases. The confirmation of tuberculosis was bacteriogical in 37 cases and histological in the others in smoker's group. It was bacteriological in all patients in non smoker's group. Smoking patients presented severe adverse event with antituberculosis treatment. This was not reported in controls. A delay of recovery (time between symptoms and recovery) was longer in smokers than in non smokers patients. Pulmonary sequels such as dyspnea and fibrosis were most frequent in smokers. Conclusion: Tobacco may delay the recovery of pulmonary tuberculosis and may induce pulmonary sequels in spite of correctly antituberculosis treatment. Therefore smoking prevention and cessation should be a priority in TB prevention program.