Determinants of loss to follow-up and tuberculosis patients’ awareness

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Abstract

Background: The highest rate of patients with the low disease outcome is represented by the lost to follow-up and died cases. The aim of the study was to assess the major determinants of low tuberculosis treatment outcome.

Material and methods: A retrospective selective, descriptive, case-control study targeting social, demographic, economic and epidemiological peculiarities, case-management, radiological aspects and microbiological characteristics of 437 patients with pulmonary tuberculosis with different outcomes: cured and lost to follow-up was performed. Patients’ awareness was established by performing a pre-designed schedule containing open-ended and close-ended questions, reflecting knowledge about disease. There were interviewed 151 patients treated after a previous lost to follow-up.

Results: It was established that the major risk factors for loss to follow-up were: the history of detention, migration, patients with MDR-TB, patient’s addressing to the hospital, previous history of treatment and social vulnerability. Most of the patients were aware about the disease through the health personnel and were satisfied with the received knowledge. The proportion of those who were informed through the mass media was high. They knew that tuberculosis is curable with a complete treatment; however, every tenth considered that two-three months are sufficient.

Conclusions: Raising awareness among patients with high risks about the compliance and the duration of the treatment, emphasizing that the treatment is free of charge and will not be started after a previous drop up will improve disease outcome.

Key words: tuberculosis, risk factors, loss to follow up.