Nutritional Allowance Support Affecting Treatment Compliance among TB Patients in Western, Nepal

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Abstract : Introduction: Nepal is one of the world's least developed countries and has a high incidence of tuberculosis (TB). The TB prevalence survey in 2019 showed 69,000 Nepalese is developing TB and 4,000 die every year. Given its disproportionate impact on the impoverished segments of society, TB often thrusts patients into extreme poverty or exacerbates their existing economic struggles. Consequently, not only the patients but also their families suffer from the loss of livelihood. This study aims to assess the support of nutritional allowance on treatment compliance among retreatment tuberculosis patients in Nepal. This is a secondary analysis of data from HMIS (Health Management Information System) to investigate treatment compliance among tuberculosis patients and its association with nutritional allowance. The study population consisted of all individuals (N=2972) who had received services from July 16, 2021, to December 14, 2022. The SPSS 21version was used to conduct descriptive and bivariate analysis. Out of the total TB patients (n=2972), a third-fourth (65.9%) of TB patients were male. More than one-tenth (12.3%) of respondents received a nutrition support allowance. The TB treatment compliance rate was more (89.91%) in the nutrition support allowance group compared to the non-nutritional support group (87.98%). TB patients who received the nutritional support allowance were nearly twice as likely to have a higher TB treatment compliance rate compared to those who did not receive the nutritional support allowance. Providing nutritional allowance support to tuberculosis (TB) patients can play a significant role in improving treatment compliance and outcomes. Age and the type of TB are important factors that have shown statistical significance in relation to treatment compliance. Therefore, it is recommended to provide nutritional allowance support to both new and retreatment TB patients. To enhance treatment compliance among TB patients, it is beneficial to provide timely nutrition allowances and arrange home visits by TB focal persons.

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1