

Delay in the Diagnosis of Tuberculosis and Initiation of TB Treatment in the Private and Public Health Sectors, Udaipur District, Rajasthan, India, Nov 2013

Authors : Yogita Tulsian, R. S. Gupta, K. F. Laserson

Abstract : Background: Delays in the diagnosis and treatment of TB facilitates disease transmission in the community, so we conducted a study to evaluate the burden of and risk factors for delay in TB diagnosis and initiation of TB treatment among patients in the private and public sectors in Udaipur district, Rajasthan, India. Methods: A retrospective cohort study was conducted among 100 new sputum-positive TB. Patients were interviewed in the intensive phase of treatment September 2013-November 2013 Long total diagnosis delay (TDD) was defined as a time interval between first symptom to confirmed diagnosis > 30 days. Long health treatment delay (HTD) was defined as a time interval between confirmed diagnosis to treatment initiation > 7 days. Results: We observed a median TDD of 55 days (range: 7-136 days) in the public sector and of 92 days (11-380 days) in the private sector. Long TDD in the private sector was significantly associated with middle-higher socio-economic status (Risk Ratio (RR): 2;95% CI: 1.3-3). The reasons reported from the private sector for long TDD were suspect TB patients not advised for sputum examination (RR: 42; 95% CI:2.6-660), practise of self-medication (RR: 17.4; 95% CI: 1.1-267), or lack of awareness (RR: 9.7;95% CI: 0.6-145). The median HTD in the public sector was 3 days (range: 0-14 days), and in the private sector, 2 days (range: 0-11 days) (non-significant difference). Conclusions: Long TDD in private sector may be improved through sputum referral for all suspect TB cases and better education to all regarding TB.

Keywords : diagnosis delay, treatment delay, privatesector, public sector

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