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Delay diagnosis of tuberculosis and associated factors

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Statement of the Problem: Throughout the period of monitoring the incidence of tuberculosis in Siberia and Far East was higher than in Russia as a whole. So in Siberia the total incidence of tuberculosis in 2016 was 91.4 per 100 000 population, Far East - 94.6 per 100 000 population, in Russia 53.3 per 100 000 population. Delay in diagnosis of pulmonary tuberculosis worsens results of treatment, increases severity, mortality and transmission. Purpose of the study was to determine the magnitude of delay to diagnosis of tuberculosis and associated risk factors.

Methods: Medical reports of 143 patients with pulmonary tuberculosis were analyzed. Clinical presentation, radiological, laboratory data of all patients were collected. The chances for establishment of diagnosis and influencing factors were estimated.

Results: Males 66% mean age 35±13.3 yrs. The period from the disease manifestation up to establishment of final diagnosis was 56.7±57.3 (mean±SD) days. The average patient delay was 21.6 days. 51 (41.5%) patients with pulmonary tuberculosis nonspecific antibiotic therapy were used because of misdiagnosis and it increased the duration of the period of diagnosis. Factors associated with increase of diagnostic delay: old age (OR 0.2), dyspnea (OR 0.4), revealing of individual foci (OR 0.2) on chest X-ray, monocytosis (OR 0.2), increase of level CRP (OR 0.1), smear-negative TB (OR 0.1).

Conclusion: The analysis of factors delaying tuberculosis diagnosis may help tuberculosis control programs to diagnose and to treat patients more effectively.

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