

# Quality Care in the Management of Tuberculosis

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## DESCRIPTION

Tuberculosis (TB) is a disease caused by a single infectious agent, “*Mycobacterium tuberculosis*” and TB is known to be the ninth leading cause of death worldwide ranking above HIV/AIDS (Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome). Sometimes, TB-HIV co-infection is also caused which is even more serious illness. In order to eradicate such infectious diseases, quality care is crucial. This study assesses the quality of TB care in the health facilities and processes of TB diagnosis and treatment. The global community in collaboration with the World Health Organization (WHO) has been committed in improving quality of TB care through developing global TB strategies, and enhancing Sustainable Development Goal (SDG) frameworks.

The increasing rate of mortality shows how important it is to control the disease to improve the quality of life. Moreover, since TB is an air bone contagious disease, proper measures have to be taken to control the disease being spread to a healthy person. The quality of TB care is an approach that helps in identifying flaws in TB services and prioritizing interventions to improve care across countries. The major factors that facilitate TB quality of care include-

- Immediate diagnosis and treatment (in case of symptomatic patients).
- All the health care professionals should utmost care while treating the TB patients.
- By monitoring properly and analyzing the TB patients periodically.
- Providing guidelines, manuals and standard operating procedures used for the analysis of patients.

As a part of quality care, the world health organization (WHO) has introduced some vaccine treatments to reduce the complications of TB at an early stage. BCG vaccination is generally prescribed among children of age group below 1 year, to enhance the vaccine-induced immune response. Vaccinating at premature stage would be beneficial to strengthen the immune system. It is generally accepted that administration of BCG vaccination is effective and there is protection against several innumerable types of TB, such as military TB,

tuberculosis meningitis, which are most commonly observed in young children. Additionally, treatment with first-line regimen (except pyrazinamide) would be beneficial.

## TB diagnosis guidelines

The availability of patient education and specimen rejection guidelines was reported in less than one quarter (22.9%) and 48.6% of laboratory units respectively. Eight of ten health facilities had TB diagnosis protocol, Standard Operating Procedure (SOP) for TB laboratory diagnosis and internal quality control.

## TB diagnosis characteristics

While diagnosing TB patients, it is important to know about the patient history, especially Human Immunodeficiency Virus (HIV) infection or diabetes, which might increase the risk for progression to TB disease. Further, it is crucial to know whether the patient has been previously diagnosed with Latent Tuberculosis Infection (LTBI) or TB disease. In such cases, care should be taken because if the regimen provided to the patient previously is inadequate there are chances for the disease to recur due to the drug resistance. Similarly, all the pulmonary areas (that includes lungs) should be diagnosed else this might trigger risk to other parts like spine and kidney as well.

## CONCLUSION

TB is one of the leading causes for increased mortality rate among people. In addition, TB-HIV co-infection is even more severe and it has to be treated at an early stage. This is because during HIV, the immune system is weakened and when TB affects a HIV person it deteriorates the functioning ability of the immune system. Apart from the health care qualities, it is very important to monitor TB patient periodically, to minimize the risk for transmission of TB. It is also important to look after the risks associated among the patients who are exposed with infectious patients. Taking good care about the health by counseling at regular intervals and maintaining proper hygienity can be beneficial. Improving quality of TB care is the most fundamental process that facilitates to move towards the end TB strategy.

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