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Tuberculosis treatment experience at Hillbrow Health Centre

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TUBERCULOSIS TREATMENT EXPERIENCE

AT HILLBROW HEALTH CENTRE

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A research report submitted to the Faculty of Health Sciences, University of Witwatersrand, Johannesburg, in partial fulfillment of the requirements for the degree

of

Master of Public Health.

Johannesburg, 2007

DECLARATION

I, Motseng Malehloa Makhetha declare that this research report is my work. It is being submitted for the degree of Master of Public Health in the University of Witwatersrand, Johannesburg. It has not been submitted before for any degree or examination at this or any other University.

……..(Signature of the candidate)

……day of…….(month), 2007.

ABSTRACT

Tuberculosis remains a communicable disease of major public health importance in South Africa. The purpose of this study is to search for trends in management of tuberculosis at Hillbrow Health Centre from 2000 to 2002. Furthermore, to assess completeness of routine records, compare performance of tuberculosis control in this clinic with others in region 8 during 2002 and identify residential areas with high volumes of tuberculosis patients. Data was obtained from tuberculosis documents at the facility. Information provided by the district office was compared with research findings and used to evaluate performance of Hillbrow Health Centre against the other four clinics in the region.

The main findings from the study conducted at Hillbrow Health Centre were the large number of patients diagnosed with tuberculosis annually and cure rates below 40% during the study period. In 2002, the clinic reported the highest proportion of TB patients and the lowest cure rate compared to the other four clinics reporting tuberculosis in region 8. “Hot spots” for the disease were identified in Hillbrow and Joubert Park suburbs and this is where Esselen, Hillbrow and Urban Health Clinics are situated. There is room for improvement of tuberculosis control. More research needs to be done to determine factors contributing to the high incidence of TB in Hillbrow and Joubert Park Suburbs.

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GLOSSARY OF TERMS

DEFINITION OF TUBERCULOSIS CASES

Extra pulmonary tuberculosis – Tuberculosis of body organs other than the lungs

Moved tuberculosis patient – Moved to another facilities within the same district during treatment for tuberculosis

New patient - A patient who has never been treated for tuberculosis or was on tuberculosis treatment for less than four weeks.

Newly registered - A patient who is registered for tuberculosis at the original facility that recorded and notified him/her as a case of tuberculosis

Pulmonary tuberculosis -Tuberculosis affecting the lung parenchyma

Sputum smear positive – Presence of acid-fast bacilli in a sputum smear

Transferred tuberculosis patient – A patient who has been transferred to another facility outside the district and whom the treatment outcome is not known.

Tuberculosis bacteriological coverage – The proportion of patients diagnosed with pulmonary tuberculosis whose sputum smears were examined for bacteria in a given time.

DEFINITION OF TREATMENT OUTCOMES

Tuberculosis cure - A patient who is diagnosed PTB by smear or culture positive sputum, who is smear negative at or one month prior to completion of TB treatment and on at least one previous occasion.

Tuberculosis death - End of life in a patient who is currently on treatment for tuberculosis.

Tuberculosis treatment completed - A patient who completes the recommended tuberculosis treatment without reference to bacteriological proof of cure.

Tuberculosis treatment failure - A tuberculosis patient who remains or becomes sputum smear positive PTB again at five months or later during tuberculosis treatment

Tuberculosis treatment interruptor - A tuberculosis patient who interrupted treatment for two or more months.

Tuberculosis treatment success – Includes patients who were cured and those that completed treatment for tuberculosis.

Unevaluated treatment outcome- A tuberculosis patient without a record of treatment outcome at the scheduled time for completion of the course of treatment.

Definitions were adapted from the Tuberculosis Register and WHO Report 2005

ABBREVIATIONS

AIDS - Acquired immunodeficiency syndrome

DOT - Directly Observed Treatment

DOTS - Directly Observed Treatment Short Course

HHC- Hillbrow Health Centre

HIV- Human immunodeficiency virus

MDR-TB - Multi Drug Resistant tuberculosis

NTCP - National Tuberculosis control programme

PTB - Pulmonary tuberculosis

TB - Tuberculosis

Retr - Retreatment

WHO - World Health Organisation