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Diagnosis and Treatment Delay in Tuberculosis

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Objectives: Administrative measures in tuberculosis infection control are the most effective and cost-effective. The most effective of management measures is early diagnosis and early treatment of tuberculosis patients. We aimed to investigate the diagnosis and treatment delay of tuberculosis in our hospital

Methods: The patients with tuberculosis who were diagnosed and treated at Süreyyapaşa Chest Diseases EAH between 01 January 2017 and 31 December 2017 were evaluated retrospectively. Patients diagnosed at the external center and receiving MDR TB treatment were excluded from the study. The time from first admission our hospital to diagnosis: delay in diagnosis; The time from first admission our hospital to diagnosis: treatment delay. The diagnosis of tuberculosis was made by bacteriological (smear positive, culture positive, pcr), histopathological, and clinical radiological findings

Results: 490 patients with a mean age of 45.42±18.26 were evaluated. 324 (66.12%) patients were male. 185 (37.75%) smear positive, 112 (22.85%) culture positive, 9 (1.83%) pcr, 131 (26.73%) clinical radiological, 53 (10.81%) patients were diagnosed histopathologically. Delayed diagnosis of smear-positive pulmonary tuberculosis was 6±13 days, treatment delay after hospital admission was 7±13 days, and treatment delay after diagnosis was 1±2 days. Diagnosis delay of culture-positive pulmonary tuberculosis was 40±30 days, the treatment delay was 57±30 days. Delay of the histopathological diagnosis was 51±52 days, treatment delay after hospital administration was 64±55 days, treatment delay after diagnosis was 14±28 days. Delay in PCR diagnosis was 22±15 days, treatment delay after hospital administration 31±16 days, treatment delay after diagnosis was 9±9 days

Conclusion: It is important to consider tuberculosis in the preliminary diagnoses and to give importance to bacteriological diagnosis in patients with clinical radiological findings. At the stage of evaluation of the results of the examination and after the diagnosis, the patient should not be delayed in reaching the physician

Keywords: Diagnosis delay, treatment delay, tuberculosis