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Challenges faced by MDR-TB patients and health workers involved in clinic-based ambulatory care in Kampala Uganda, a cross sectional study

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Background: Multidrug resistant TB (MDR-TB) caused by a strain of mycobacterium tuberculosis which is resistant to isoniazid and rifampicin is a growing concern in Uganda. To address the issue of costs of hospitalization and limited space, clinic-based ambulatory care has been adopted. This study explored the challenges faced by MDR-TB patients and health workers involved in clinic-based ambulatory care in Kampala, Uganda.

Methods: For this cross sectional study, we conducted 8 in-depth interviews among MDR-TB patients and 9 key informant interviews among health workers involved in providing clinic based ambulatory care. The focus was on the salient themes and recurring points with respect to challenges faced by MDR-TB patients and health workers. Thematic analysis was be conducted and contents of in-depth and key informant interviews were then grouped according to themes and analyzed in an excel sheet.

Results: From the 8 in-depth interviews among MDR-TB patients, side effects of the treatment, long duration and burden of the MDR-TB treatment, drug stock-outs, feeding issues and cost of accessing treatment were cited as major challenges faced. From the 9 key informant interviews, health workers reported non-adherence of MDR-TB patients to MDR-TB drugs, drug stock-outs and limited space at the peripheral facilities.

Conclusions: Non-adherence among MDR-TB patients was a key challenge identified by the health workers hence the number of counselling sessions should be increased. There is need for the National Tuberculosis and Leprosy Program and Ministry of Health to ensure an uninterrupted supply of quality-assured second-line drugs to avoid drug stock-outs. For the Clinic-based ambulatory care approach to be effective, there's need to address the challenges reported in Uganda.

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