



ABS006

A PROSPECTIVE INTERVENTIONAL STUDY ON QUALITY OF LIFE IN TUBERCULOSIS PATIENTS

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BACKGROUND: Tuberculosis (TB) is one of the oldest infections known to affect humans and in spite of the new treatment strategies and observations; it remains one of the most substantial causes of death in the world. Studies focusing on the QOL among TB patients are limited and no such investigation has been considering the fact that improvement in health-related QOL is an important factor for better response for treatment among TB patients. The aim of the study was to assess the quality of life including physiological, general health perception and social role functioning among patients with tuberculosis.

METHODOLOGY: A prospective interventional study for a period of 6 months has been carried out in a tertiary care hospital. Prior permission has been obtained from the Institutional Ethics Committee, School of Pharmaceutical Sciences, Vels University. Tuberculosis patients of both sex, aged between 18-65 years on anti-tubercular therapy were included. SF-12 Questionnaire was used to assess the Mental Component Scoring (MCS) and Physical Component Scoring (PCS). The patient was counselled after 14 days, again MCS and PCS were assessed.

RESULTS: A total of 109 patients were taken for the study. There was an improvement in physical and mental status of TB patients.

DISCUSSION: HRQL or health related quality of life is a relatively new index for TB patients. The QoL assessed for the cases when compared with that of the control group helped in the evaluation of the impact of TB on QoL of patients. Our study included assessment of Socio-psychological & exercise adaptation score on 12 parameters (SF-12 Scale) to evaluate a health status in patients at the start of treatment and after the IP phase of treatment. HRQL scoring was sensitive to changes in the quality of life of patients as demonstrated by statistically significant differences in score changes observed at the end of treatment. The present study revealed that there was a significant difference between the scores of physical component scoring (PCS) and mental component scoring (MCS) patient. In the present study, it was concluded that the scores of the men were significantly higher than those of the women in the dimensions of SF 12 in active cases.

CONCLUSION: This study illustrates that the HRQL scoring for tuberculosis (SF-12 Scale) patients shows the changes in the quality of life after giving counselling to the patients and this should be made mandatory for all TB patients during their treatment course which would help the patients for the betterment of their treatment and improves their quality of life. Improved physical and mental status of the TB patients in this study implies the positive impact of patient counselling which will improve success rate of the treatment.

Keywords: Tuberculosis, Prognosis, Quality of Life.