

Previously Lost to follow up TB clients are more likely to get lost to follow up again when restarted on anti-TBs: findings at a high volume clinic in Kampala

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Introduction

Tuberculosis (TB) continues to be a critical global health TB remains a leading cause of global mortality, especially in an endemic country like Uganda. Lost to follow up on TB treatment is associated with clinical complications, drug resistance and potential spread of TB resistant strains to communities.



Aims

We aimed at investigating factors associated with LTFU outcomes for patients initiated on TB treatment.

Methods

We retrospectively reviewed records for clients initiated on anti TBs from January 2021 to December 2022, at Kawaala HC IV. Data was entered into a data abstraction tool. Data on patient demographics, HIV status, TB type, diagnostic method presence of at least one phone contact and treatment supporter was collected from the unit TB register. Descriptive analysis was done. Adjusting for apriori confounders of age, sex and HIV status, logistic regression was done to determine associations. Analysis was in STATA 14.

Results

746 records were reviewed, 64% were males, mean age was 32 years, 66% were PBCs, 50% were HIV positive, 99% had a treatment supporter, 98% had at least one phone contact, 94% were newly diagnosed, 23(3%) previously LTFU, and 7% had an outcome of lost to follow up.

Table 1: Factors associated with losses to follow up among TB patients - multivariate regression models

Variable Categories	aOR (95%CI)	P	
Age in years	0-10	1	
	11-20	1.78 (0.43- 7.4)	0.429
	21- 30	1.07 (0.41-2.82)	0.886
	31-40	0.99 (0.38 - 2.59)	0.987
	> 40	1.70 (0.58 - 4.96)	0.333
Gender	Female	1	
	Male	0.77 (0.43 - 1.40)	0.390
Referral	Community	1	
	Facility	2.86 (0.63 - 5.08)	0.012
Presence of a phone	Yes	1	
	No	2.97 (0.97 - 9.02)	P=0.044
Pt type	Treatment after LTFU	1	
	New	0.22 (0.08 - 0.60)	P=0.001

The odds of LTFU outcomes among patients who were newly started on anti TBs were reduced by 78% compared to those who were previously LTFU.

Conclusion

There is need to customise interventions for previously LTFU patients being reinitiated on anti TBs to mitigate recurrence of LTFU outcome mitigate the high mortality rates observed in TB cases.



Hope for the future

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