

The impact of Co-morbidity and Treatment Characteristics on Adherence to Tuberculosis Treatment in Kisumu East Subcounty, Kenya

Abstract

Despite the great strides made in TB diagnosis and highly effective shorter periods of treatment, there are still poor treatment outcomes in a significant proportion of the patients. Poor adherence to TB treatment is one of the leading causes of poor outcomes of treatment. Kisumu East Subcounty in Kenya records some of the highest adverse outcomes of care. Therefore a cross sectional descriptive study was conducted in the Subcounty to establish the impact of co-morbidity and treatment characteristics on TB treatment adherence among tuberculosis patients above 18 years attending TB clinics in Kisumu East Subcounty. The data was analyzed using SPSS version 21. Descriptive statistics, bivariate analysis and binary logistic regression were used in the analysis and data presented in contingency tables and figures. Significance was assumed at P value ≤ 0.05 . Belief that TB treatment affects other treatments; (OR: 0.03; 95% CI: 0-0.1 ; $P < 0.001$), retreatment (OR: 11; 95% CI: 4.2-29.6 ; $P < 0.001$), not completing previous treatments (OR:19; 95% CI:6-73 ; $P < 0.001$) self discontinuation (OR:0.1; 95% CI: 0.01-1 ; $P < 0.049$) were significant in predicting adherence. These aspects can serve as a guide for flagging some patient as having potential for non-adherence thus appropriate follow-up measures instituted in time. It is important to establish the effects of socio-demographic aspects on adherence in every TB care setting for appropriate follow-up.

Authors:

[Morris Shisanya](#), [John Arudo](#), [James Aggrey Oloo](#), [Everlyne Nyanchera Morema](#)