Delay in diagnosis of bacilliferous pulmonary tuberculosis: evaluation of new cases in Florianópolis metropolitan region

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Resume:

In 2013, 5.7 million tuberculosis new cases were reported around the world. World Health Organization estimates that one-third of the world’s population is latently infected with *Mycobacterium tuberculosis*. Successful control of tuberculosis (TB) depends on early and effective treatment, long delay are associated with more severe clinical presentation. The aim of this study was to evaluate the epidemiology and diagnostic of new cases of tuberculosis in Florianópolis metropolitan region, Santa Catarina (2014). Laboratory data were evaluate along with demographic and clinical information accessed by a standardized questionnaire to 79 patients. The median age was 34.9 years (15 - 64), 64.6% of patients were male. Unhealthy habits as current tobacco use (67.2%), heavy alcohol drinking (32.8%) and illegal drugs use (38.3%) were observed. TB-HIV coinfection was identified in 25% of 67 HIV tested patients; the second most frequent comorbid was diabetes mellitus (5%). Six patients were homeless. Among the risk to TB 63% reported to live with people previously treated or being treated for tuberculosis. The majority of TB diagnosis were done in hospitals (50%) followed by basic health care unit (28.6%). Average time between the onset of the first symptoms and the diagnosis of pulmonary Tuberculosis (“delay” in diagnosis) was 9 weeks (1 to 48). Although TB is a very old disease, the clinical finds and risk factors are well established and our region is prevalent for this morbidity, the diagnosis has a long delay, contributing for the TB spreading. This situation can improve with continuous education of the general practitioners in the TB diagnosis methods, ever request sputum smear together with the radiologic examination and rapid molecular test when available, as well as with increase of the health education on TB in population

Key words: *Mycobacterium tuberculosis*, Diagnosis, Treatment