

## **Accessibility and satisfaction to TB diagnosis and treatment services among TB patients from TB centers of Mandalay Region, 2017-2018**

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*47<sup>th</sup> Myanmar Health Research Congress*

### **Abstract**

This implementation research was done in collaboration with National Tuberculosis Programme. This study included 169 new pulmonary TB patients registered at TB centers of four townships in Mandalay Region during 2017-2018. The mean (SD) age of respondents was 44 (17) years, and 72% were male. Two-third (70%) of respondents was from rural areas. Five percent were migrants. Ninety percent were literate. Average monthly family income was 290,000 MMKs. Among the TB patients, 26 % of them had co-morbid diseases, 6% of respondents drank alcohol, and 13% smoked within a month of diagnosis. One-fifth (20%) of respondents answered that there were TB affected people in their families. Six percent had history of family members who died of TB. The mean (SD) duration between development of TB like symptoms and getting diagnosis for TB was 68 (109) days. For TB like symptoms, the first places where TB patients sought for care were private health facilities (48%), public hospitals (19 %), rural/urban health centers (12%), public TB centers (5%), drug store (5%), and traditional medicine (1%). For their TB like symptoms, 33% of TB patients were referred to health facilities for sputum examination by someone. The mean (SD) distance from home of patients to TB health facilities was 9 (14) miles. The mean transportation cost for TB diagnosis was 3,200 MMKs per visit. For the transportation cost, 31% of them could not afford. Regarding knowledge of TB, 10% of respondents had never heard of TB before they had TB disease, 15% did not know that TB was caused by TB bacteria, 20% did not know that TB can be diagnosed by sputum examination, and 69% did not know that TB can be diagnosed by chest X-ray. However, all TB patients believed that TB is a curable disease. Regarding satisfaction to health care services provided by public health facilities, 97% of patients were satisfied with overall TB care services: satisfaction to attitudes of health staffs (98%), information provided by health staffs (92%), quality of care provided (96%), cost (97%), and cleanliness of health facilities (98%). To conclude, this implementation research developed action plan to provide effective health education and counseling to every TB patient, to identify TB patients who could not afford transportation cost to reach to the health facilities to continue receiving TB care by public health facilities.