

SMOKING AND TREATMENT FAILURE IN PATIENTS DIAGNOSED WITH PULMONARY TUBERCULOSIS

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Smoking is a risk factor for treatment failure in tuberculosis, delay in sputum conversion, co-infections, among others such as pneumonia and influenza. Treatment failure increase costs, furthermore, these patients can host the Mycobacterium tuberculosis resistant bacillus. Recently the WHO conducted a systematic review and found a significant association between active smoking and recurrence plus mortality by tuberculosis, and described as possible confounding variables: alcohol consumption, socio-economic situation and others. Objective: Determine the association between use tobacco and treatment failure in sensitive pulmonary tuberculosis. A case control study was conducted from IBIT, reference center for TB treatment, 284 medical records from pulmonary tuberculosis patients between 2007 and 2015 were reviewed: 50 cases as defined as patients with treatment failure and 234 patients without failure. Results: There were no difference in gender, years of education, marital status and monthly income. Mean age were greater among patients with failure (47.6 years [15.3] X 38.9 [14.1]; $p < 0.01$). Age-group 41-60 years was the most frequent (47.8%) in the patients who failed treatment as compared to 31-50 years (47.0%) in the patients who responded adequately ($p = 0.08$). Adjusted OR for being current cigarette smoker in patients with pulmonary tuberculosis treatment failure compared with patients without failure treatment was 2.9 (95%CI: 1.4 - 6.0). This study supports that patients with tuberculosis treatment failure for sensitive pulmonary tuberculosis, have more chance of being current cigarette smokers, even after adjustment for confounding variables (education and age). This fact raises the importance to promote smoking cessation specialist care services, even in under treatment tuberculosis patients. Special sight should be given to patients between the 4th and 5th decade of life considering their increased potential chance of treatment failure.

Palavras-chave: Smoking, tuberculosis, failure.