



CLINICAL FEATURES OF PATIENTS WITH LATE DETECTED PULMONARY TUBERCULOSIS

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Introduction

Passive detection of symptomatic patients leads to the diagnosis of severe, extensive and late detected forms which have more frequently unfavourable treatment outcome.

Purpose

To assess the clinical features of patients with late-detected pulmonary tuberculosis (PTB).

Keywords

Tuberculosis, management, outcome.

Material and methods

A longitudinal, selective study which evaluated the features of 92 patients registered with late detected PTB in Chisinau during 2019 was conducted, including 56 (61%) caseous pneumonia and 36 (39%) lobitis. Including criteria: age > 18 years, diagnosed with late detected PTB, hospitalized in the Municipal Hospital of Phthisiopneumology, in 2019, signed informed agreement. Excluding criteria: age <18 years, diagnosed with another localization, timely detected, hospitalized in other institutions, other period 2019, absence of the signed consent.

Results

The insidious onset 1-3 months was in 65(71%), 90-120 days in 11(12%) and 4+ months in 16(17%) cases. Cough with muco-purulent sputum in all cases, 34(36%) - dyspnea, 21 (23%) - chest pain, 17(18%) - hemoptysis, 10(11%)- pulmonary hemorrhage, 88(95%)- anorexia, 5(5%)-cachexia. Passively detected by the general practitioner were 43(46%), through screening 12(13%), passively detected by specialists-15(16%) and through screening 10(18%) patients. 12(13%) through emergency. Therapeutic success was established in 34(37%), 42(45%) died and 16(18%) failed.

Conclusion. The peculiarities of patients with late detected TBP were: insidious onset, clinical expressiveness that were determined by passive detection and resulted in a low therapeutic success rate and high death rate.