

Trends and Clinical Outcomes of Registered TB Cases 1999-2011: Is There a Significant Change in Extrapulmonary Pattern?

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Objective: To evaluate the patterns, clinical trend and outcome of registered TB cases from 1999 through 2011.

Design: A Retrospective Cohort Study.

Setting: Tuberculosis Unit, Aseer Central Hospital, Abha, Saudi Arabia.

Method: Six-hundred and eighty registered TB records were reviewed. Definitions, diagnostic criteria and treatment regimen of the National Tuberculosis Control Program (NTP) were used.

Result: Six-hundred and eighty registered TB records were reviewed. Four hundred three (59.3%) were pulmonary TB and 277 (40.7%) were extrapulmonary TB. In the period from 1999 to 2002, the pulmonary to extrapulmonary ratio was 4:1. However, in the subsequent years, this ratio has changed to 1:1. During the study period, no significant difference in sex was found; the annual defaulter rate and average cure rate were 12% and 75%, respectively. The best indicator of cure was weight gain. Overall, the mortality rate was approximately 18% (≤ 10 years and ≥ 60 years). TB of the Central Nervous System (TB-CNS) showed the highest mortality rate, 211 (31%).

Conclusion: Cure rate is comparable to worldwide figures. Trends towards more TB extrapulmonary cases were observed. The highest mortality rate was reported among TB-CNS. Prospective randomized controlled study is recommended to evaluate the reasons behind the change.