Perception of Tuberculosis among Patients in A Rural Setting in Aligarh

Uzma Eram¹, Tabassum Nawab¹, Najam Khalique²

ABSTRACT

Introduction: Tuberculosis is a major cause of illness worldwide. It is caused by Mycobacterium tuberculosis that affects the lungs and other body parts. It is commonly transmitted via aerosol. The burden is rising globally due to poverty, increasing population and HIV/AIDS. It is estimated that one-third of the population in the World have tubercular infection, in spite of that the observed cases represent tip of iceberg so the aim of the study was to assess perception of illness of tubercular patients.

Material and Methods: The present study was conducted in Rural Health Training Centre, Jawan, of Jawahar Lal Nehru Medical College, AMU, Aligarh. A semi structured questionnaire was used to collect data from January- March, 2015. A total of 80 subjects, more than 15 years age group, residents of Jawan, were selected who either had completed tuberculosis treatment or are still on treatment. An informed consent was taken, before starting the questionnaire.

Results: shows that out of 80 subjects under study, 50% were in age –group 35 to 55 years and 75 % were males. It also showed that 40% of subjects under study said they fear other TB patients because they may infect them.31.25% of subjects under study said they would be friendly to other TB patients but would avoid them. Only 18.75% of the subjects said they wanted to help them and 10% said they had no particular feeling. The study showed 62.5% of the subjects got family support, 80% had threat of jobs or wages, 90% felt sad and socially neglected. The study showed about self–perception of being TB patient.62.5% got family support, 80% had threat of jobs or wages, 90% felt sad and socially neglected, 56.25% expressed that utensils for food/drink were separated from them, 50% felt that other people behave differently and 10% felt isolated within the family.

Conclusion: The study showed that the misconceptions about the disease is present in most of the subjects. We also observed stigma towards TB. TB awareness programs should focus on reduction of TB associated stigmas. We need to train our health workers towards TB. TB awareness programs should focus on reduction of TB associated stigmas and feeling neglected by family and society is common in TB patients.

Keywords: Tuberculosis, perception, rural areas

INTRODUCTION

Tuberculosis is a major cause of illness worldwide. It is caused by Mycobacterium tuberculosis that affects the lungs and other body parts. It is commonly transmitted via aerosol. The burden is rising globally due to poverty, increasing population and HIV/AIDS. It is estimated that one-third of the population in the World have tubercular infection, in spite of that the observed cases represent tip of iceberg. Delayed presentation is considered as a reason for growing burden of T.B. in developing countries. Understanding on health and perceived severity of T.B. are vital factors for timely health care seeking and diagnosis. In developing countries, poor knowledge and perception of tuberculosis is prevalent, which causes delay in diagnosis and treatment of tuberculosis. India has the highest number of TB cases in the world. The current study was done to assess perception of illness of tubercular patients.

MATERIAL AND METHODS

The present study was conducted in Rural Health Training Centre, Jawan, of Jawahar Lal Nehru Medical College, AMU, Aligarh. A semi structured questionnaire was used to collect data from January- March, 2015. A total of 80 subjects, more than 15 years age group, residents of Jawan, were selected who either had completed tuberculosis treatment or are still on treatment. An informed consent and ethical clearance was taken, before starting the questionnaire.

STATISTICAL ANALYSIS

Descriptive statistics like mean, percentages and SD were used to interpret the data. Microsoft office 2007 was used to make tables.

RESULTS

Table 1 shows that out of 80 subjects under study, 50% were in age –group 35 to 55 years and 75 % were males. Table 2 showed that 40% of subjects under study said they fear other TB patients because they may infect them.31.25% of subjects under study said they would be friendly to other TB patients but would avoid them. Only 18.75% of the subjects said they wanted to help them and 10% said they had no particular feeling. Table 3 showed about self–perception of being TB patient.62.5% got family support, 80% had threat of jobs or wages, 90% felt sad and socially neglected, 56.25% expressed that utensils for food/drink were separated from them, 50% felt that other people behave differently and 10% felt isolated within the family.

DISCUSSION

In our study, as shown in table 1, 75% of the subjects were males. A study of Nepal also showed that the male patients were higher than female patients. We did not look for any psychological status of the patients in our study, however, 90% of the subjects felt socially neglected/ low esteem, 80% were afraid of loss of jobs/wages, 50% of the subjects complained of changed behavior of other persons. However, more than half of the subjects expressed cooperative behavior of their family members. Tuberculosis related pervasive stigma may worsen the quality of life of its victims. A higher degree of psychiatric morbidity like denial, hopelessness about life, tension/anxiety and feeling neglected by family and society is common in TB patients. Fear of being infected has been reported to be a cause of discrimination against TB sufferers in Nepal. The social isolation of TB patients was also described in Ghana and Nepal. Tuberculosis causes a great impact on the social, psychological and mental well-being of the victim. Being diagnosed with TB can create the fear of isolation and
The study showed that the misconceptions about the disease is present in most of the subjects. We also observed stigma towards TB. TB awareness programs should focus on reduction of TB associated stigmas. We need to train our health workers and also educate our masses especially those living in rural areas.

### REFERENCES

17. Dodor EA, Kelly S. We are afraid of them.: attitudes and behaviours of community members towards tuberculosis in Ghana and implications for TB control efforts. Psychol Health Med. 2009;14:170-179.

### Table 1: Background characteristics

<table>
<thead>
<tr>
<th>Age (in years)</th>
<th>Numbers</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>&gt;or = to 15-35</td>
<td>15</td>
<td>18.7</td>
</tr>
<tr>
<td>&gt;35-55</td>
<td>40</td>
<td>50</td>
</tr>
<tr>
<td>&gt;55 or more</td>
<td>25</td>
<td>31.2</td>
</tr>
</tbody>
</table>

### Table 2: Feeling about other TB patients

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family members are cooperative towards me</td>
<td>50</td>
<td>62.5</td>
</tr>
<tr>
<td>Increase sadness/socially neglected/low esteem</td>
<td>72</td>
<td>90</td>
</tr>
<tr>
<td>Utensils are separated for me</td>
<td>45</td>
<td>56.25</td>
</tr>
<tr>
<td>Threat of job/wages</td>
<td>64</td>
<td>80</td>
</tr>
<tr>
<td>Most people behave differently</td>
<td>40</td>
<td>50</td>
</tr>
<tr>
<td>Feel isolated within the family</td>
<td>8</td>
<td>10</td>
</tr>
</tbody>
</table>

### Table 3: Perception on being a TB patient

### CONCLUSION

The study showed that the misconceptions about the disease is present in most of the subjects. We also observed stigma towards TB. TB awareness programs should focus on reduction of TB associated stigmas. We need to train our health workers and also educate our masses especially those living in rural areas.