[Clinical and morphological characteristics of deaths in patients with tuberculosis].

https://arctichealth.org/en/permalink/ahliterature199201

Author: B P Bubochkin
        P N Novoselov
        I P Elovskikh

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          Cause of Death
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          Male
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          Retrospective Studies
          Russia - epidemiology
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          Tuberculosis - mortality - pathology

Abstract: The clinical, morphological, and tannatological features of tuberculosis have been studied in patients who died in 1994-1996. Group 1 and Group 2 included 91 and 190 patients, respectively. It has been found that the present-day stage is marked by a trend for tuberculosis reversion with the characteristics typical of the preantibiotic period. Along with worse epidemiological parameters, there is an increase in the incidence of miliary tuberculosis and caseous pneumonia. The common cause of death is tuberculosis progression. The present stage differs from the preantibiotic period by the fact that progression rapidly occurs with specific therapy due to an increase in cases with documented drug resistance.

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Compliance predictors of patients with pulmonary tuberculosis needing phthisiological treatment

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Author: I A Volchegorskii
P N Novoselov
T P Dudarova
A A Bolotov

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Treatment Outcome
Treatment Refusal
Tuberculosis, Pulmonary - epidemiology - metabolism - physiopathology - psychology - surgery

Abstract: The factors predicting initial readiness of patients with infiltrative pulmonary tuberculosis to give their consent to transthoracic interventions were investigated. It was shown that initial readiness of patients to give their consent to phthisiological treatment directly depended on the indices of "social functioning" and lymphocyte percentage in leukogram. The total prognosis algorithm with 94.1% sensitivity and 75% specificity is presented as discriminative function estimated by "social functioning" data, lymphocyte percentage in leukogram and ordinal evaluation of complaints to sweating.

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There was a steady-state rise in tuberculosis morbidity in the Chelyabinsk Region in the 1990s. At the same time, the number of patients whose disease is untimely detected was on the increase and in some cases the disease is found just at autopsy. These facts result from the lower efficiency of tuberculosis controlling measures, from low training of general physicians in detecting and diagnosing tuberculosis, and from failure to meet the standards for examining all those who have fallen ill.
Abstract: The survey of 335 patients with joint tuberculosis and HIV-infection was carried out to establish the main medical social characteristics of the given category of patients. The sample consisted of persons characterized by of able-bodied age, education of not high level, no profession or occupied in entry-level professions, low or unstable level of income and having no family and children. The distinctive characteristic of patients with joint tuberculosis and HIV-infection is high prevalence of alcohol and drugs abuse. The concurrence of both alcohol and drug dependence was established in every one often respondent. The survey revealed very low level of medical activity of respondents. Almost half of the respondents were never examined on the subject of tuberculosis in the AIDS Center Only one third of respondents undergo the preventive fluorography timely.