

**Incidence, Time to Treatment Interruption and Associated  
Factors Among Tuberculosis Patients in Pakwach District, West Nile Region, Uganda**

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**Abstract**

**Background:** Tuberculosis (TB) is an increasing global problem and treatment interruption remains an important challenge for the care givers and the patients diagnosed with the infection. Globally, the proportion of tuberculosis treatment interruption has persisted at 6% from 2012 to 2019 and the World Health Organization (WHO) has reclassified Uganda among 30 high tuberculosis burdened countries with treatment interruption rate of up to 11%. This study aimed to determine the incidence, time to treatment interruption and associated factors among tuberculosis patients in Pakwach district, West Nile region, Uganda.

**Methodology:** A retrospective cohort study was conducted in seven Diagnostic and Treatment Units (DTUS) in Pakwach district. The sample size was determined using the formula (Camargo et al., 2019). A total of 195 participants on tuberculosis treatment were selected using simple random sampling, data was extracted from unit tuberculosis registers and client cards using a predesigned data extraction tool.

**Results:** A total of 48(25%) patients interrupted treatment, with the median time to treatment interruption at 9 weeks. Baseline weight (aHR: 0.93, p-value: 0.004) and comorbidity status (aHR: 2.80, p-value 0.048) were significantly associated with TB treatment interruption. Other factors including HIV co-infection, Gender, TB treatment history, and treatment after initial loss to follow-up were not significantly associated with treatment interruption.

**Conclusion:** Treatment interruption was at 25% in Pakwach district. Having a higher baseline weight at treatment initiation and absence of comorbidity were significantly associated with decreased occurrence of treatment interruption. Thus, regular follow-ups and nutritional support is highly recommended among TB patients in the study setting.

**Key words:** Treatment interruption, Tuberculosis, Patients, Care-givers

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