

Publication

Pathways and associated costs of care in patients with confirmed and presumptive tuberculosis in Tanzania : a cross-sectional study

JournalArticle (Originalarbeit in einer wissenschaftlichen Zeitschrift)**ID** 4501064**Author(s)** Mhalu, Grace; Hella, Jerry; Mhimbira, Francis; Said, Khadija; Mosabi, Thomas; Mlacha, Yeromin P.; Schindler, Christian; Gagneux, Sébastien; Reither, Klaus; de Hoogh, Kees; Weiss, Mitchell G.; Zemp, Elisabeth; Fenner, Lukas**Author(s) at UniBasel** [Mhalu, Grace](#) ; [Hella, Jerry](#) ; [Ibrahim, Khadija](#) ; [Schindler, Christian](#) ; [Mlacha, Yeromin Paul](#) ; [Gagneux, Sebastien](#) ; [Reither, Klaus](#) ; [de Hoogh, Kees](#) ; [Weiss, Mitchell G.](#) ; [Zemp Stutz, Elisabeth](#) ;**Year** 2019**Title** Pathways and associated costs of care in patients with confirmed and presumptive tuberculosis in Tanzania : a cross-sectional study**Journal** BMJ Open**Volume** 9**Number** 4**Pages / Article-Number** e025079

To assess pathways and associated costs of seeking care from the onset of symptoms to diagnosis in patients with confirmed and presumptive tuberculosis (TB).; Cross-sectional study.; District hospital in Dar es Salaam, Tanzania.; Bacteriologically confirmed TB and presumptive TB patients.; We calculated distance in metres and visualised pathways to healthcare up to five visits for the current episode of sickness. Costs were described by medians and IQRs, with comparisons by gender and poverty status.; Of 100 confirmed and 100 presumptive TB patients, 44% of confirmed patients sought care first at pharmacies after the onset of symptoms, and 42% of presumptive patients did so at hospitals. The median visits made by confirmed patients was 2 (range 1-5) and 2 (range 1-3) by presumptive patients. Patients spent a median of 31% of their monthly household income on health expenditures for all visits. The median total direct costs were higher in confirmed compared with presumptive patients (USD 27.4 [IQR 18.7-48.4] vs USD 19.8 [IQR 13.8-34.0], $p=0.02$), as were the indirect costs (USD 66.9 [IQR 35.5-150.0] vs USD 46.8 [IQR 20.1-115.3], $p<0.001$). The indirect costs were higher in men compared with women (USD 64.6 [IQR 31.8-159.1] vs USD 55.6 [IQR 25.1-141.1], $p<0.001$). The median total distance from patients' household to healthcare facilities for patients with confirmed and presumptive TB was 2338 m (IQR 1373-4122) and 2009 m (IQR 986-2976) respectively.; Patients with confirmed TB have complex pathways and higher costs of care compared with patients with presumptive TB, but the costs of the latter are also substantial. Improving access to healthcare and ensuring integration of different healthcare providers including private, public health practitioners and patients themselves could help in reducing the complex pathways during healthcare seeking and optimal healthcare utilisation.

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