Risks for Nonadherence

When patients adhere to their complete course of TB treatment:

- 1. The risk for developing drug-resistant TB is decreased.
- 2. The risk of TB spreading to others is decreased.
- 3. Prolonged illness, disability, and possible death from TB are avoided.

Risks for Nonadherence (continued)

Can we reliably predict who will be nonadherent to treatment?

No! Anyone can be nonadherent, regardless of social class, educational background, age group, gender, or ethnicity.

Risks for Nonadherence (continued)

Which persons are at especially high risk?

- Homeless or people who don't have permanent housing
- Persons who use alcohol or other substances
- Persons who are unable to take pills on their own because of mental, emotional, or physical disabilities
- Children and teenagers
- Persons who previously did not adhere to their TB treatment

How Can DOT Staff Build Rapport and Trust?

- 1. "Start where the patient is."
- 2. Protect the patient's confidentiality
- 3. Communicate clearly
- Avoid criticizing the patient's adherence behavior; suggest behavior changes respectfully
- 5. Be on time and be consistent
- 6. Adopt and reflect a nonjudgmental attitude
- 7. Other ways?

Skills That Contribute to Good Communication

- Listen attentively and respectfully; use open, relaxed body language
- 2. Assure patient of privacy and confidentiality
- 3. Avoid being judgmental or accusatory and never show frustration
- 4. Use simple, nonmedical terms
- 5. Use appropriate language level for the patient

Skills That Contribute to Good Communication (continued)

- 6. Limit the amount of information given
- 7. Discuss most important topics first and last
- 8. Repeat important information
- 9. Listen to feedback and questions from the patient
- 10. Use concrete examples
- 11. Ask open-ended questions

Common Adverse Reactions to TB Drugs

Caused by	Adverse Reaction	Signs and Symptoms
Any drug	Allergic reactions	Skin rash
Ethambutol	Eye damage	Blurred or changed vision Changed color vision
Isoniazid Pyrazinamide Rifampin	Hepatitis	Abdominal pain Abnormal liver function test results Dark urine Fatigue Fever for 3 or more days Flu-like symptoms Lack of appetite Nausea Vomiting Yellowish skin or eyes
Isoniazid	Nervous system damage	Dizziness Tingling or numbness around the mouth
	Peripheral neuropathy	Tingling sensation in hands and feet

[Source: Self-Study Modules on Tuberculosis: Module 4, Treatment of Tuberculosis Infection and Disease. Atlanta: Centers for Disease Control and Prevention; 1995, p. 32]

Common Adverse Reactions to TB Drugs (continued)

Caused by	Adverse Reaction	Signs and Symptoms
Pyrazinamide	Stomach upset	Stomach upset, vomiting, lack of appetite
	Increased uric acid	Abnormal uric acid level Joint aches Gout (rare)
Rifampin	Bleeding problems	Easy bruising Slow blood clotting
	Discoloration of body fluids	Orange urine, sweat, or tears Permanently stained soft contact lenses
	Drug interactions	Interferes with certain medications, such as birth control pills, birth control implants, and methadone treatment
	Sensitivity to the sun	Frequent sunburn
Streptomycin	Ear damage	Balance problems Hearing loss Ringing in the ears
	Kidney damage	Abnormal kidney function test results

[Source: Self-Study Modules on Tuberculosis: Module 4, Treatment of Tuberculosis Infection and Disease. Atlanta: Centers for Disease Control and Prevention; 1995, p. 32]

Review Questions

- 1. What are two negative consequences that can result if a TB patient does not adhere to the treatment regimen?
- 2. What are five reasons that a patient might be nonadherent? What is a possible way to deal with each reason?
- 3. Name five techniques to build trust and communicate effectively with TB patients.
- 4. What are two ways you can be sure that a dose is actually swallowed by a patient?
- 5. What are three commonly observed adverse reactions to anti-TB medications?