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## Evaluation of Dispensary Treatment Outcomes in 2013 -2017

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**Objectives:** We aimed in our study to evaluate the treatment outcomes of the patients with TB recorded at our dispensary in 2013-2017.

**Methods:** The retrospective evaluations were made on the age, gender, treatment history, bacteriological results and treatment outcomes of the patients with TB recorded at our dispensary in 2013-2017. The patients who were diagnosed non tuberculosis and who were transferred to other dispensaries were excluded from this study.

**Results:** 583 persons of total 643 TB patients who were recorded at our dispensary in the years 2013-2017 were included in this study. 20 patients were excluded from the study due to being transferred to other dispensaries while 40 patients were excluded from the study for being diagnosed non tuberculosis. 43.91% of the total patients were female while 56.08% were male. 4.11% (24 persons) of total patients were foreigner. 67.06% (391 persons) of the patients were pulmonary tuberculosis while 32.93 (192 persons) were extra pulmonary tuberculosis. 48.84% (191 persons) of the patients with pulmonary tuberculosis were smear positive while 46.29% (181 persons) were smear negative. 92.45% (539 persons) of patients are first time treated while 7.54% (44 persons) were treated before. 16 patients had HR resistance, 21 patients had H resistance and 258 patients had HRES sensitivity. Succeeded treatment rate is 88.33% (515 persons), treatment defaulter rate is 2.91% (17 persons), treatment failure rate is 1.02% (6 persons) and mortality rate is 7.20% (42 persons). When Ki-Square test is practiced, rate in males (14.2% 46 patients); rate in HR resisted patients (57.1% 8 patients) and rate in >65 years old (20.04% 32 patients) were found higher (p0.1/p 0.000/p 0.001).Treatment rate in females were found higher (p 016), mortality rate in age group 36-65 years old and in age group of >65 were found higher when evaluated by logistic regression analysis (p 0.000/p 0.000). Treatment defaulter rate was found higher in re-treated patient group (p 0.004).

**Conclusion:** In conclusion, closer tracking is more required for the treatments of patients with HR resistance, being retreated for TB disease and with older age.

**Keywords:** Tuberculosis, treatment outcomes, older age