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Factors Affect the Frequency of Tuberculosis in Syrian Refugee: Example of Şanlıurfa

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Objectives: Humanitarian crisis in Middle East, being refugees and some problems have moved back to the agenda. Tuberculosis (TB), one of the most important infectious diseases, common condition in societies. The aim of this study is to investigate the relationship between some factors related to TB in Syrian refugees and the relationship of TB with some air pollution parameters.

Methods: This is retrospective file scanning study. Between the years 2012-2018 TB patients registered Tuberculosis Dispensary in Şanlıurfa, smoking status, education level, warming shape, biomass, pesticide, dust storm exposures and bacteriological diagnosis, treatment results, related organ, PM10 and SO₂ records were examined

Results: The study group ranged from 1 to 72 years, mean age was 31.15±15.16. Research group consisted of women 53.3% of and 46.7% men. 75% of research group was illiterate. The number of cases diagnosed was 1.3% in 2012 and 11.8% in 2018 and the highest rate was 25.8% in 2015. Of the study group reported that 56.3% smoked, 91.3% had been exposed to dust storm, 24% had biomass exposure and 30.1% had pesticide exposure. It was determined that research group was most heated with 39.9% coal. In study group were 71.2% of the subjects Lung TB While, and 3.9% were both lung and extrapulmonary TB. Of the cases in study group 18.8% were cured treatment, 42.4% were completed treatment, 15.7% were quit the treatment, 6.6% were transplanted and 4.8% were death, 11.4% It has been found that treatment is still continuing. Between the years 2012-2018, PM10 (70 µg/m³) and value of SO₂ (175 µg/m³) was found significantly differ from values determined for Turkey. (Respectively 20,319; 0.000-304,860; 0.000). There was statistically significant difference between PM10 and year of diagnosis. It was determined that significant difference was due to 2015 and 2016 years. A statistically significant difference was found between SO₂ values and diagnosis year and bacteriological diagnosis. The significant difference between SO₂ level and year of diagnosis was to be caused from years 2017-2018. The difference between SO₂ level and bacteriological diagnosis was found to be caused by the smear+lung TB group.

Conclusion: Especially in societies that have to migrate due to compulsory reasons such as war, there is an increase in the number of cases with the effect of air pollution levels. Taking preventive measures for environmental factors and air pollution will contribute to the reduction of the number of cases to occur.

Keywords: Bacteriological diagnose, PM10, refugee, smoking, SO₂, tuberculosis