AMBULATORY TREATMENT FOR TUBERCULOSIS PATIENTS: PRO ET CONTRA

Yu. I. Feshchenko, N. A. Lytvynenko, M. V. Pogrebna, Y. O. Senko, L. M. Protsyk

Abstract

A healthcare reform has been recently started in Ukraine, providing patient-centered treatment of any diseases, including tuberculosis (TB). The traditional (centralized) model for TB care includes a hospitalization of patients during an intensive phase of treatment to ensure proper nursing and adherence to treatment and limited infection transmission. However, this model often results in a transmission of "super-infection" at hospital due to improper infection control measures, requiring high costs, and lack of social support for patients, isolated from their families during the treatment. Thus, the proportion of hospital treatment must be smaller, especially reserved for the patients with smear positive microscopy, for a period until smears become negative. The main role of TB hospital is epidemiological with the aim of isolation of sputum smear positive patients and reduction threat to the public. At the same time an appropriate infection control measures should be established, which are expensive both in terms of introduction and service.

There is the only one way out to solve the problem: the TB service has really come to an urgent need to be reformed. First, the funding should be allocated not per bed, but per patient. Second, a large number of poor quality anti-tuberculosis hospitals are not required, they should be partly eliminated, partly restructured and ensure proper infection control. Third, all of these steps should be implemented after improvement of ambulatory management, utilizing an out-patient decentralized highly efficient models.

Kev words: tuberculosis, ambulatory treatment, reorganization

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Yurii I. Feshchenko

Director of SO "National Institute of phthisiology and pulmonology named after F. G. Yanovskii National Academy of medical sciences of Ukraine" Academician of NAMS of Ukraine, professor 03680, Kviv. 10, M. Amosova str.

Tel.: 380 44 275 0402, fax: 380 44 275 2118, admin@ifp.kiev.ua