

Study of Addiction in Newly Diagnosed Patients of Pulmonary Tuberculosis in Abbasia Chest Hospital

Thesis

Submitted for partial fulfillment of master degree in Chest Diseases and Tuberculosis

By

Eman Mohamed Elbaz

(M.B.,B.Ch.)

Supervised by

Prof. Dr. Adel Mohamad Saeed

Professor of Chest Diseases
Faculty of Medicine - Ain Shams University

Dr. Riham M. Hazem M. Raafat

Lecturer of Chest Diseases
Faculty of Medicine - Ain shams University

Faculty of Medicine
Ain Shams University
2017



My greatest gratitude to **ALLAH** whose guidance and support were the main motive behind accomplishing this work.

I would like to express my profound gratitude and sincere appreciation to *Prof. Dr. Adel Mohamad Saeed*, Professor of Chest Diseases, Faculty of Medicine, Ain Shams University, for his great help and support and gentle guidance and insistence. Without his help, this work would have never been accomplished.

I would also like to express my appreciation to Dr. Riham M. Hazem M. Raafat, Tecturer of Chest Diseases, Faculty of Medicine, Ain Shams University, for her continuous help, guidance and encouragement.

Last but not least I would like to express my deep thanks and gratitude to all family members for supporting me and pushing me forward all the time.

Eman Mohamed



سورة البقرة الآية: ٣٢

Abstract

Background: Tuberculosis (TB) is an infectious bacterial disease caused by Mycobacterium tuberculosis, which most commonly affects the lungs. It is transmitted from person to person via droplets from the throat and lungs of people with the active respiratory disease. Approximately 9.4 million new cases and 1.7 million deaths were encountered per year worldwide.

Aims: The aim of this work is to study the relation between Addiction and the disease (tuberculosis) in Newly Diagnosed Pulmonary Patients attending to outpatient clinic or admitted to Abbasia Chest Hospital between August 2015 to April 2016.

Methodology: This is a prospective study, which was conducted upon addict patients who were diagnosed as new cases of pulmonary tuberculosis (positive sputum for ZN stain) at different departments and intensive care units in Abbasia chest hospital during eight months from August 2015 to April 2016 to detect the relation between Addiction and the disease (tuberculosis).

Results: In this study, all the patients were low socioeconomic class males (31% prisoners) who were diagnosed as new cases of pulmonary tuberculosis. The mean of age was 33.7 years, more than half of them were single also more than half of them were sever smokers.

Conclusion: There is some degree of relationship between addiction and incidence and severity of pulmonary tuberculosis regarding radiological findings in chest X-ray, HIV infection and mortality rate among cases of the study.

Recommendations: Drug addiction is a major public health problem that needs to be studied from different aspects. Studies are needed in different regions of the community, ages, socioeconomic and educational standards, reasons for which drug addicts started addiction, awareness of health risk and the reasons for drug addiction.

Keywords: Pulmonary Tuberculosis, Mycobacterium Abbasia Chest Hospital

Contents

Subjects	Page
List of abbreviations	II
List of figures	IV
List of tables	
• Introduction	
Aim of the work	
Review of Literature	
Definition of pulmonary tuberculosis	5
• definitions of tuberculous cases	
♦ Risk factors	10
♦ Diagnosis	13
♦ Treatment	19
♦ Definition of addiction	23
♦ Types of drug abused	26
Magnitude of the problem	35
♦ Routes of administration for drug addiction	38
♦ High risk groups	40
Risk factors of drug addiction	42
Tuberculosis and illicit drug use	51
Prevention of drug addiction	61
Subject and Methods	74
• Results	80
• Discussion	99
• Summary	108
• Conclusion	
• Recommendations	
• References	
Arabic Summary	113
Arabic Summary	

List of Abbreviations

	,
AFB	Acid fast bacilli
ALT	Alanine aminotransferase
AST	Aspartate aminotransferase
BCG	Bacille Calmette-Guerin
CT	Computed tomography
CXR	Chest x-ray
DOTS	Direct Observed Therapy Strategy
DSM III	Diagnostic and Statistical Manual of Mental Disorders 1987
ER	Emergency room
HBV	Hepatitis B virus
HCV	Hepatitis C virus
HIV	Human immunodeficiency virus
ICD 10	International statistical classification of diseases and related health problems
ICU	Intensive care unit
IDU	Intravenous drug users/Injection drug users
IGRA	Interferon gamma release assay
INH	Isoniazide
LTBI	Latent tuberculosis infection
M.tuberculosis	Mycobacterium tuberculosis
MDMA (Ecstasy	3,4-methylenedioxymethamphetamine
P-A	Postero-anterior
PAS	P-Amino Salicylic acid

List of Abbreviations

PCR	Polymerase Chain Reaction			
POSIT	Problem oriented screening instrument for teenagers			
PZA	Pyrazinamide			
RIF/R	Rifampicin			
SCC	Short Course Chemotherapy			
SD	Standard deviation			
STD	Sexually transmitted disease			
ТВ	Tuberculosis			
ТНС	Tetrahydrocannabinol			
US	United states			
WHO	World Health Organization			
ZN	Ziehl-Neelsen			

List of Figures

No.	<u>Figure</u>			
<u>1</u>	Prisoners among the studied cases.			
<u>2</u>	Smoking index among the studied cases.			
<u>3</u>	Substance abuse among the studied cases.	83		
<u>4</u>	Hospital addiction among the studied cases.			
<u>5</u>	Radiological Patterns among the studied cases.	85		
<u>6</u>	Radiological Grading among the studied cases.	85		
<u>7</u>	Infections among the studied cases.	87		
<u>8</u>	Death among the studied cases.	87		
<u>9</u>	Comparison between prisoners and non- prisoners regarding radiological characteristics.			
<u>10</u>	Comparison between died and lived regarding age.	93		
<u>11</u>	Comparison between died and lived regarding Addiction duration.	95		
<u>12</u>	Comparison between died and lived regarding Addiction substance.	95		
<u>13</u>	Comparison between died and lived regarding radiological pattern.	97		
<u>14</u>	Comparison between died and lived regarding Radiological Grading.	97		

List of Tables

No.	<u>Table</u>	<u>Page</u>
1	Recommended doses of first line anti – tuberculous drugs for adults.	22
<u>2</u>	Demographic characteristics of the studied cases.	80
<u>3</u>	Addiction characteristics of the studied cases.	82
4	Radiological characteristics of the studied cases.	84
<u>5</u>	Clinical characteristics of the studied cases.	86
<u>6</u>	Comparison between prisoners and non- prisoners regarding Demographic characteristics.	88
<u>7</u>	Comparison between prisoners and non- prisoners regarding Addiction characteristics.	89
<u>8</u>	Comparison between prisoners and non- prisoners regarding radiological characteristics.	90
9	Comparison between prisoners and non-prisoners regarding Clinical characteristics.	92
<u>10</u>	Comparison between died and lived regarding Demographic characteristics.	93
<u>11</u>	Comparison between died and lived regarding Addiction characteristics.	94

List of Tables

No.	<u>Table</u>				<u>Page</u>
<u>12</u>	Comparison between regarding radiological ch	died naracter	and istics.	lived	96
<u>13</u>	Comparison between regarding Clinical characterists	died cteristic	and	lived	98

INTRODUCTION

Tuberculosis (TB) is an infectious bacterial disease caused by Mycobacterium tuberculosis, which most commonly affects the lungs. It is transmitted from person to person via droplets from the throat and lungs of people with the active respiratory disease (*Global tuberculosis report* 2013).

Approximately 9.4 million new cases and 1.7 million deaths were encountered per year worldwide (*Rudeeaneksin et al.*, 2012).

Tuberculosis (TB) continues to be one of the major causes of death and disability. The Global Burden of Disease Study estimated that in 2004 TB was responsible for 2.5% of global mortality (among men 3.1%; women 1.8%) and 2.2% of global burden of disease (men 2.7%; women 1.7%), with more impact in developing countries (*WHO*, 2008).

The Center for Disease Control and Prevention (CDC) states that one-third of the world's population is infected with MTB resulting in annually approximately 1.80 million deaths worldwide (WHO, 2011).

Tuberculosis (TB) remains a major public health burden in many developing countries. Approximately 1.3

billion people smoke tobacco products and most of them live in low- or middle-income countries, where the burden of TB is also very high (*Shafey et al.*, 2004).

Drug addiction is the use of Drugs in ways, which are not medically approved because they cause strong feeling of euphoria or they alter perception of the user leading to physical and psychological dependence (*Dhingra et al.*, 2008).

The physiological effects of drug use, along with the environment and risk behaviors of drug users, may all contribute to the high prevalence of TB among drug users. A number of in vitro studies have demonstrated deleterious effects of drug use on the immune system (*Friedman et al.*, 2003).

Drug addiction in tuberculosis can lead to not only the spread of tuberculosis but also of other diseases due to their immune compromised status (*Abalkhail*, 2001).

Drug users and injection drug users in particular, have driven TB epidemics in a number of countries (*Robert et al.*, 2009).

Drug use is frequently associated with a number of epidemiological factors, including tobacco use, homelessness, alcohol abuse, and incarceration, that confer additional risk of TB (*Niveau*, 2006).

Current evidence shows that cannabis smokers are more at risk of developing a range of infective lung conditions (*Nguyen et al.*, 2010).

Cannabis smokers are at increased risk of developing legionnaires' disease. Several studies report cannabis smokers developing tuberculosis (*Oeltmann et al.*, 2004).

AIM OF THE WORK

The aim of this work is to study the relation between Addiction and the disease (tuberculosis) in Newly Diagnosed Pulmonary Patients attending to outpatient clinic or admitted to Abbasia Chest Hospital between August 2015 to April 2016.

PULMONARY TUBERCULOSIS

Definition

TB is an infectious disease caused by the bacillus Mycobacterium tuberculosis. It typically affects the lungs (pulmonary TB) but can affect other sites as well (extra pulmonary TB). The disease is spread in the air when people who are sick with pulmonary TB expel bacteria, for example by coughing. In general, a relatively small proportion of people infected with M. tuberculosis will develop TB disease; however, the probability of developing TB is much higher among people infected with HIV. TB is also more common among men than women, and affects mostly adults in the economically productive age groups (Global Tuberculosis Report, 2013).

History of Tuberculosis

Tuberculosis (TB) has a long history. It was present before the beginning of recorded history and has left its mark on human creativity, music, art, and literature; and has influenced the advance of biomedical sciences and healthcare. Its causative agent, *Mycobacterium tuberculosis*, may have killed more persons than any other microbial pathogen (*Daniel*, 2006).