

## **ABSTRACT**

### **Introduction**

Wakiso district faces a high burden of HIV prevalence of 8.5% which is higher than the National HIV prevalence of 7.3%. Despite the fact that the district health system started the implementation of integrated TB/HIV collaborative services in 2007, little has been documented about the burden of pulmonary TB given the prevalence of HIV. Therefore, the main objective of this study was to establish the determinants influencing the prevalence of pulmonary tuberculosis in such a semi-urban and high HIV prevalent setting as a way of evaluating the implementation of integrated TB/HIV collaborative services in the district since 2005.

### **Methods**

A descriptive cross-sectional study employing both qualitative and quantitative data collection methods was carried out in health centres of Wakiso district. HIV patients attending HIV clinic and in-charges of health facilities participated in the study. HIV patients provided quantitative data using a semi-structured questionnaire while in-charges provided qualitative data using a key informant interview guide.

### **Results**

A total of 258 patients participated in the study. Majority of who were females, 69%. More than half, 59% of patients were single but ever married. The most common religion was catholic, 43%. Patients were mainly of primary education level, 45%. Out of the 258 patients interviewed, 76 (30%) were found to be on TB treatment. Majority, 91% of the patients knew that TB is curable. 9% of the patients were currently cigarette smokers and more than a quarter (26%) were currently alcohol drinkers. Majority, 90% of the patients were taking ARVs treatment at the time of data collection. At multi-variate analysis, patient's level of education, history of being in contact with a known TB patient, not knowing that TB is spread by droplet,

drinking alcohol and disagreeing that TB is common among HIV patients were the patient aspects associated with TB disease. Qualitatively, low staffing, drug stock outs and lack of enough infra-structure were the challenges facing health facilities in the provision of TB/HIV care services.

### **Conclusion**

There is high TB prevalence among HIV patients in Wakiso district. Low levels of knowledge concerning TB modes of transmission, cigarette smoking and history of being in contact with a known TB person are risk factors for acquiring tuberculosis. Limited resources such as staff, space and failure to appreciate infection prevention measures are a hindrance to reducing the prevalence of TB among HIV people.

### **Recommendation**

There is need to increase numbers and skills of health workers in health facilities especially those working in the TB/HIV clinics. More creative ways of passing on both TB and HIV information to the public are still needed in Wakiso district. There should be improvement in the infrastructure so that health facilities do not become areas where patients can catch TB.