Introduction: This study was to determine factors influencing adherence to TB treatment among TB patients at Alive Medical Services. The major objective was to assess factors influencing adherence to TB treatment among TB patients at Alive Medical Services, Kisugu-Makindye Kampala Uganda. And the specific objectives were:

To establish the level of adherence to TB treatment among TB patients at Alive Medical Services.

To assess social -demographic factors that influence the level of adherence to TB treatment among TB patients at Alive Medical Services.

To assess Health System related factors that influence the level of adherence to TB treatment among TB patients at Alive Medical Services.

To assess medicine related factors that that influence the level of adherence to TB treatment among TB patients at Alive Medical Services.

Methodology: A cross-sectional study with qualitative and quantitative data collection methods was conducted among TB patients who attended the clinic in November 2014. A probability stratified sampling was used for the patients who were available at the time of study. With the desired sample size of 150, an appropriate representation of 75 was in each subgroup after random selection.

Results: The level of adherence was 59% .Having an excellent patient-healthcare worker relationship, social support, knowledge on how TB is transmitted, treatment failure in relation to missed doses was significantly associated with adherence (p<0.002). Phase of treatment had no association with adherence.

Recommendation: Despite its limitations, this study should be able to give insights into the reasons behind the persistent default rates and subsequently low treatment success rates, be used to formulate strategies to improve the quality of care and increasing compliance to TB treatment, used as a basis for further generalizable studies, and contribute towards the development of strategies aimed at decreasing the TB defaulter rates and patients lost to follow up hence improve the general outcomes of TB patients. Social support to TB patients should be encouraged. The excellent patient-health care worker relationship must be enhanced. Medicine should always be available at the

facility. Health education to the patients should be enhanced. New knowledge concerning the factors associated with poor TB treatment adherence in Makindye division should be utilized by local health authorities. Further research to determine factors influencing stigma towards TB patients is recommended.