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 KEY WORDS : TUBERCULOSIS / TREATMENT DEFAULT RATE / HEALTH  
 CARE SETTINGS

KWANG IL RIM: TUBERCULOSIS TREATMENT DEFAULT RATE AND  
 ITS CONTRIBUTING FACTORS: COMPARATIVE EVALUATION  
 BETWEEN VARIOUS HEALTH CARE SETTING IN BANGKOK,  
 THAILAND. THESIS ADVISOR: ASSISTANT PROFESSOR NUNTAVARN  
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The objective of the study was to determine the TB treatment default rate in various health care settings in Bangkok, Thailand and to comparatively evaluate the contributing factors between those settings. Three health care settings; Bangkok Chest clinic, coordinating health center No 4. and Hua Chiew private hospital were selected as the study sites. The patients who were put on standardized TB regimen from Oct. 2001 to Sep. 2004 were selected randomly and reviewed by their treatment cards. Health personnel in those health care settings were interviewed on the pre-structured questionnaire. Descriptive statistical methodology, bi variate analysis, and logistic regression analysis method were used for data analysis. The overall default rate in those settings was 19 %, and default rate in each setting was 18.3 % in Bangkok chest clinics, 21.3 % in public health center and 17.9 % in Hua Chiew private hospital. This study found that type of health care setting was not significantly associated with treatment default. Some factors such as gender, occupation, HIV positive status and drug addiction were significantly associated with treatment default. The unacceptably high default rate in all health care settings involved in the study indicates the magnitude and seriousness of the problem in TB control program. Due to the limitation of time, research did not look at the all-potential factors related to treatment default. Therefore, further study should be carried out focusing on not only health system related factors, but also in association with patients' factors such as socio economic, behavioral, and disease and regimen related factors.

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