ABSTRACT

CONTEXT: Tuberculosis is a chronic, debilitating illness whose global disease burden is very high. Treatment adherence is very important in the treatment. Poor treatment adherence results in default, relapse, failure and drug resistance. Many factors like drug side effects, lack of feasibility, drug abuse, poor support contributes to poor adherence. Among these factors, substance abuse and psychiatric illness plays a vital role in default though it is under estimated.

AIM: A study on prevalence of psychiatric co-morbidity, alcohol abuse, personality factors in tuberculosis default patients.

OBJECTIVE: To study the prevalence of psychiatric illness, alcohol abuse, personality factors among tuberculosis defaulter patients. To study the role of these factors in Anti tuberculosis drug discontinuation

DESIGN: Cross sectional study

SETTING: Government Thiruvoteeswarar Tuberculosis Hospital, a tertiary care tuberculosis hospital in Otteri, Tamilnadu

STUDY POPULATION: 110 subjects diagnosed as tuberculosis default lost to follow up were enrolled in the study.
**SCALES USED:** Socio-demographic profile, SCID, AUDIT, 5 factor questionnaire, HAMD, YMRS, PDSS

**RESULTS:** 64 members stated that their alcohol habit was the reason for them to discontinue tuberculosis drugs. Factors found to have a positive association with tuberculosis default angry hostility, vulnerability, permissive and broad mindedness values, tender mindedness and compliance. 4 subjects were found to have psychiatric illness.

**CONCLUSION:** In this study 79 members reported to abuse alcohol daily having a dependent pattern and nearly 64 stated alcohol as the reason for them to discontinue anti tuberculosis medications. Psychiatric illness was reported only by 4 people in this study and no correlation was found between it and drug default. Regarding personality factors, angry, vulnerability, anxiousness, assertiveness, depressiveness and impulsivity were found to be highly prevalent among the defaulter groups and it also had a positive correlation with alcohol use which states that patients with these factors are highly prone for poor drug adherence.

**KEY WORDS:** Tuberculosis default, alcohol dependence, psychiatric illness, personality factors.