

ABSTRACT

Pulmonary tuberculosis control program using DOTS (Directly Observed Treatment Short Course) in Banjarmasin had commenced in 1996/1997. The numbers of pulmonary tuberculosis cases from 1998 to 2001 were respectively 264, 242, 311, and 252, with respective conversion rate of 76%, 74%, 77%, and 75%. These figures remained less than the minimum rate established by the Department of Health, Republic of Indonesia, which was 80%.

The objective of this study was to disclose correlation between the performance of *Pengawas Menelan Obat* (PMO) (Drug Consumption Controller) and results of intensive therapy in patients with positive BTA pulmonary tuberculosis in Banjarmasin, in order to obtain accurate information in selecting PMO for each patient.

This study used case control design by matching age, sex, and location of treatment of the patients. Samples were positive BTA pulmonary tuberculosis patients aged of ≥ 15 years who received anti-tuberculosis therapy category 1 and accomplished intensive treatment in 20 community health centers between June and November 2002. Case samples were individuals whose results of sputum final examination at intensive stage showed positive BTA, while control samples were those the who showed negative BTA. Case and control samples consisted of 43 individuals each.

Results showed that PMO with unsatisfactory performance had no contribution to conversion four times higher than those with satisfactory performance. PMO with inadequate knowledge had chance four times higher to have unsatisfactory performance than those with adequate knowledge. PMO who were not relatives of the patients had chance three times higher to have unsatisfactory performance than those who were relatives of the patients. Junior PMO had chance three times higher to have unsatisfactory performance than senior PMO, and patients with inadequate knowledge had chance four times higher to have PMO with unsatisfactory performance than those with adequate knowledge.

PMO was found to have satisfactory performance when they had adequate knowledge on pulmonary tuberculosis, being the relatives of the patients, or had previous experience as PMO.

In conclusion, PMO performance has significant correlation with results of intensive therapy. It is recommended that in order to have PMO with satisfactory performance, PMO should be recruited from the patients' relatives and from those who have previous experience as PMO. Intensive and continuous training should also be provided to the PMO and the patients.