



## Tuberculosis Awareness Program: Need for Longer and More Rigorous Follow-up

Kieran Walsh

Clinical Director, BMJ Learning BW Yrs Kieran, London WC1H 9JR, UK

### Correspondence to:

Dr. Kieran Walsh, BMJ Learning, BMJ Group, BMA House, Tavistock Square, London WC1H 9JR, UK. E-mail: [kmwalsh@bmjgroup.com](mailto:kmwalsh@bmjgroup.com)

**How to cite this article:** Walsh K. Tuberculosis awareness program: Need for longer and more rigorous follow-up. *Int J Prev Med* 2016;7:4.

### DEAR EDITOR,

Gothankar is to be praised for reporting the study of the effects of a tuberculosis awareness program on the knowledge of tuberculosis among schoolchildren.<sup>[1]</sup> While the program did seem to show positive results, there were some missed opportunities to demonstrate findings that would be more robust.

First of all, the improved knowledge demonstrated was short-term. It would be interesting and perhaps still possible to find out if the improved knowledge was retained 1 month or even 6 months after the intervention. Tuberculosis is typically a chronic infectious disease and so efforts to contain it must be measured in months and years rather than a week.<sup>[2]</sup>

Second, the study looked at knowledge among schoolchildren. Knowledge is important, but it is often insufficient on its own to result in changed behaviors. For example, knowledge of modes of transmission of tuberculosis may have increased, but did the schoolchildren actually change their behavior to reduce their odds of exposing themselves? Participants may have gained knowledge but did they have the communication skills to enable them to pass this knowledge on to fellow family members? There is no evidence of this from the data presented; perhaps a follow-up study might look at the important outcomes of improved skills and changed behaviors among schoolchildren.

Third, the paper reports that the medical students gained various skills as a result of taking part in the program, but do not present any data to back this up. It would have been helpful if the medical students themselves were followed-up by means of the quantitative survey or qualitative interview - but there is no evidence that this took place.

Fourth and finally, the program consisted of a number of different components. However, it is impossible from the data presented to find out which component had the biggest impact or which was the most cost effective. A follow-up randomized controlled trial might reveal the answers to these questions.

**Received:** 07 Apr 13 **Accepted:** 22 Mar 15

**Published:** 11 Jan 16

### REFERENCES

1. Gothankar JS. Tuberculosis awareness program and associated changes in knowledge levels of school students. *Int J Prev Med* 2013;4:153-7.
2. Zumla A, Raviglione M, Hafner R, von Reyn CF. Tuberculosis. *N Engl J Med* 2013;368:745-55.

#### Access this article online

Quick Response Code:



Website: [www.ijpvmjournal.net/www.ijpm.ir](http://www.ijpvmjournal.net/www.ijpm.ir)

DOI:  
10.4103/2008-7802.173794