

**LETTER TO THE EDITOR****Basu Saurav\*****OPEN ACCESS**

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Dear Editor,

The article by Tola et al provides critical insights into the psychosocial and patient perception aspects which predict treatment non-adherence in Tuberculosis (TB) patients on DOTS therapy (1). I would like to share certain additional perspectives which could be inferred from the findings of the study and may also be explored during future research on the subject.

1. The application of Health Belief Model (HBM) in TB patients on antitubercular drug therapy (ATT) generates the hypothesis that those patients who perceive themselves to be susceptible to adverse health outcomes on medication non-adherence are more likely to be adherent. Moreover, TB is the most common opportunistic infection in HIV-AIDS and also the most likely cause of mortality in PLHIV (2). From the theoretical perspective of HBM, HIV-AIDS patients who develop TB and are initiated on ATT should perceive greater susceptibility and threat arising from risk of complications, hospital admissions and mortality when non-adherent to ATT. However, in this study, Tola et al found that TB patients on antiretroviral treatment (ART) were more likely to be non-adherent to ATT compared to non-HIV TB patients (Table 3). This suggests that perceived barriers to ATT therapy (like fear of adverse effects) were more likely to overwhelm patient perceptions regarding the severity of TB illness in those with HIV-TB coinfection. The design and application of focused and targeted interventions which enhance understanding of the adverse implications of non-adherence to ATT in HIV-TB patients is thereby required.

2. TB patients may lapse into non-adherence or discontinue therapy (lost to follow-up) after the initial few weeks of ATT initiation. This occurs as patients perceive lesser susceptibility and lack of benefits from continuing therapy for the recommended duration. However, in this study, the duration of ATT in the participants was not factored as a predictor of non-adherence in them.

Regards,

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