

## **Clinical and social profile of patients with pulmonary tuberculosis in Reynosa Tamaulipas.**

Zavala-Perez S<sup>a</sup>, Vargas-Orozco E. A<sup>b</sup>, Hernandez-Martinez J. C<sup>a</sup>, Flores-Gomez J. F<sup>a</sup>, Rosas-Díaz M<sup>a</sup>, Garcia-Oropesa E. M<sup>a</sup>

<sup>a</sup> *Universidad Autónoma de Tamaulipas, Unidad Académica Reynosa-Aztlán, Reynosa, Tamaulipas, México.*

<sup>b</sup> *Centro Regional Contra la Tuberculosis, Reynosa, Tamaulipas, México.*

### **BACKGROUND**

Tuberculosis is an infectious disease caused by *Mycobacterium tuberculosis*. It generally causes pulmonary tuberculosis, with symptoms such as fever and expectoration. In 2020, the total number of tuberculosis cases worldwide was about 9.8 million, with a mortality of 1.5 million. In Mexico, pulmonary tuberculosis represents 79% of the total cases of tuberculosis, with an incidence of 24 cases per 100,000 inhabitants. Tamaulipas ranks fifth nationally.

This study seeks to determine the frequency in which social and risk factors associated with predisposition to tuberculosis occur in the population of Reynosa, Tamaulipas.

### **METHODS**

Through an observational and descriptive study, data were collected from patients with active pulmonary tuberculosis belonging to the Regional Center Against Tuberculosis in Reynosa, Tamaulipas. Data collection was carried out from February to May 2022 through the clinical history of the unit. Those patients in fully cured condition and those who presented negative smear microscopy during this period were excluded.

### **RESULTS**

In the February-May period, 50 records of patients with pulmonary tuberculosis were included, where 58% were men, with a mean age of 38.4 years  $\pm$  16.6 DE, 56% of the participants were from the state of Tamaulipas, followed by Veracruz and San Luis Potosí with 22% and 4% respectively. The predominant level of education was middle school (23.5%), followed by complete elementary school, while the occupation that prevailed was unemployed (41.2%) followed by housewife (21.6%).

Among the frequent symptoms were productive cough (89.8%) and fever (65.3%). Of the comorbidities present, diabetes mellitus stood out with 26%, while in the addictions we found alcoholism (25.7%) in the first place.

### **CONCLUSIONS**

The importance of describing the social and clinical situation of patients with tuberculosis lies in the identification of risk factors that can be considered in the development of strategies focused on the clinical manifestations of our region.