Abstract 43

REDUCED HEALTH-RELATED QUALITY OF LIFE AFTER TUBERCULOSIS TREATMENT IN GAMBIAN CHILDREN

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## Background

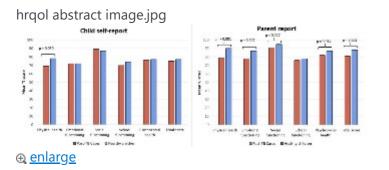
Chronic physical and psychological consequences such as reduced health-related quality of life (HRQoL) following treatment of pulmonary tuberculosis (PTB) are increasingly recognised as debilitating critical outcomes in adults. However, data on the prevalence and pattern of this complication are sparse among children who suffered from PTB. We present HRQoL data of children at least six months after completing PTB treatment in The Gambia.

## Methods

This was a cross-sectional comparative study. We used the generic Paediatric Quality of Life Inventory 4.0 (PedsQL<sup>™</sup> 4.0) instrument to measure the HRQoL among children (aged 5 to 15 years) who were diagnosed with PTB between 2014 and 2019 and had completed anti-tuberculous treatment at least six months before enrolment. We also enrolled a comparison group of healthy children who lived in the same compound as the post-TB cases but with no history of TB disease. HRQoL was measured in six scales: physical health, emotional functioning, social functioning, school functioning, psychosocial health (combined score of the emotional, social, and school functioning subscales) and a total scale. The responses were collected from the child and the parent independently.

## Results

We enrolled 68 post-TB cases (47% females) and 91 healthy controls (37% females). The post-TB cases reported significantly lower mean % HRQoL scores (69·4 ± 23·2) on the self-reported physical functioning scale of the PedsQL<sup>M</sup> compared to the healthy children (77·5 ± 20·3), p = 0·03. Similarly, the post-TB cases had significantly lower mean % scores compared to the healthy children in five out of six of the parent-reported PedsQL<sup>M</sup> scales (see figure).



## Conclusions

Post-TB cases had significantly lower HRQoL scores compared to healthy children. This study highlights the need for longitudinal assessment of physical and psychosocial health after PTB treatment completion to better understand the evolution and risk factors of poor quality of life outcomes among these children.

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