

ABSTRACT

Background: Indonesia is facing double burden of disease with high Tuberculosis (TB) burden and increasing Diabetes Mellitus (DM) prevalence. Diabetes is known as an important risk factor for TB and TB-DM comorbidity cause negative various health outcomes. Screening TB patients for DM comorbidity is important for early management to prevent further negative consequences.

Objectives: This study aims to measure the degree of implementation, moderating factors, and barriers to the implementation of DM screening among Tuberculosis patients in Primary Healthcare (PHC) in Indonesia.

Methods: Sequential explanatory mixed-method was used for this study. A cross-sectional survey was conducted with 42 providers to measure providers adherence. Interviews with 4 doctors, 2 pharmacy officers, 5 TB program managers in PHCs, 1 district level TB manager, 1 district level NCDs manager, and 5 TB patients was conducted to explain potentials and barriers from service provider and patient perspective. Data was collected in Karanganyar District between May 2024 and July 2024.

Results: The coverage of screening for each year between 2020 to 2024 (Q1) was 42.1%, 36.3%, 48.2%, 97.6%, and 78.3% respectively. Providers reported high adherence, with 95% respondents reported to always screen DM immediately after TB was diagnosed. Facilitating factors included availability of TB-DM policy, affordability of the screening, provision of blood glucose measurement, training of providers, and responsiveness of TB patients. However, delay of recording and reporting and lack of collaboration made the implementation challenging.

Conclusion: Health providers reported high adherence of DM screening among TB patients, however, delay in reporting and lack of collaboration hinder optimal implementation.

Keywords: tuberculosis, diabetes mellitus, screening, fidelity