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Tuberculosis mortality: a scoping review

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Abstract:

Tuberculosis (TB) has killed more people than any other infection and reducing deaths caused by tuberculosis is a United Nations priority. The aim of this scoping review is to describe and critically appraise the published literature concerning TB mortality. The PRISMA-ScR checklist was used. We systematically searched the PubMed database with the following search terms: "tuberculosis" AND ("death" OR "fatality" OR "mortality"). Eligibility criteria and categorisation were applied by three investigators using the Rayyan tool. Of 1730 articles found, 841 fulfilled the eligibility criteria, including 18 trials. There were far fewer publications concerning TB mortality than other similarly frequent causes of death, and other aspects of TB such as diagnosis or therapy. TB mortality publications principally originated in high-income countries, relatively neglecting countries where tuberculosis causes most deaths. Also, children were under-represented as the focus of only 4.3% of TB-mortality publications, much less than the 14% of tuberculosis deaths that occur in children. TB mortality publications focused principally on: 38% (323/841) risk factors and scores, 35% (296/841) epidemiology, 7.7% (65/841) prevention, 4.4% (37/841) reviews, 4.3% (36/841) modeling studies, 4.3% (36/841) mechanisms of death, 3.0% (25/841) long-term mortality, and 2.7% (23/841) ascertainment. TB mortality prevention studies (n=63) principally concerned improving disease diagnosis (25%), treatment (60%), and healthcare systems (6%), versus only 2 studies addressing the more holistic aspects of tuberculosis care. Thus, TB mortality research should be prioritized to become more proportionate to other similarly frequent causes of mortality. Research equity should be increased by more appropriately including high burden countries, children and people who are not receiving tuberculosis treatment. TB mortality prevention research should include more trials and should have a more holistic focus in addition to the current almost total emphasis on biomedical diagnosis and treatment of their disease.

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Approach (Complete):

Approach: Other epidemiology

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