



Prediction for Practice of Drug Prevention Mycobacterium Tuberculosis

Marek Rajzer*

Department of Pathology, University of London, UK

DESCRIPTION

Mycobacterium tuberculosis is the cause of tuberculosis (TB). TB is a deadly infectious disease that can be prevented. Objective is to contrast the drug prevention practices, attitudes, and knowledge regarding tuberculosis. Mycobacterium tuberculosis is the cause of tuberculosis (TB). TB is a deadly infectious disease that can be prevented. In many parts of the world, tuberculosis (TB) is regarded as a cause of weakness and one of the leading causes of death after AIDS and HIV (HIV and Helps). Worldwide, the prevalence of tuberculosis raises concerns and poses a significant threat to health.

The delays in the event that discovery, conclusion, health chasing, and nonadherence to treatment are a part of the reason for the widespread high TB prevalence. The World Health Organization whatever its name was at the time estimated that 10% of new TB cases worldwide were HIV-positive. 77% of these people live in Africa, and nearly 64% of them were from 7 countries India, Indonesia, Philippines, Russia, Pakistan, Nigeria, and South Africa of which 66% were men. The disease tuberculosis (TB) continues to be prevalent worldwide. 8.7 million new cases of tuberculosis were anticipated in 2011, and 1.4 million people died from the disease. Between 1996 and 2011, 52 million people in countries that had adopted the WHO approach were successfully treated for tuberculosis, saving 21 million lives. TB treatment and prevention have shifted from long-term to short-term settings for quite some time. In Iran, most of the attention is provided by general doctors in general health departments, some by confidential professionals, and some by irresistible illness subject matter experts. Clearly, clinicians must acquire sufficient information and provide proper practice fundamentals for the management of TB in order for a TB control program to be successful. The available writing reveals a wide range of treatment, assessment, and avoidance strategies utilized by physicians as a whole. There are concerns

that doctors regularly make mistakes when treating TB.

Participants were informed of the study's significance and purpose. The patients were given verbal consent before being asked to answer a few straightforward questions that were read out from the prepared performa. The Performa is included and provides sufficient explanation. It includes fundamental patient information like the type of disease, duration, and both previous and current medications. An infectious disease specialist and a medical student in their final year developed the questionnaire in accordance with Iranian guidelines for the control of tuberculosis and previous studies of a similar nature. The questionnaires asked about knowledge, attitudes, and practices, as well as a few demographic questions. As a result, little was known about TB's cause, symptoms, treatment, and prevention. We require novel approaches to information dissemination and sensitization regarding TB. The Knowledge, attitudes, and behaviors that are required to adequately protect themselves and others from tuberculosis, as well as suggestions for additional research into the factors that influence TB prevention practice among people. Anti-toxins are the treatment for both TB sickness and idle TB contamination. It is essential to follow the directions for taking your medication in order to ensure that all of the TB microbes in your body are eliminated. Your body's TB microbes may change and become anti-toxin-safe if you don't follow the directions. This indicates that your TB might become difficult to treat and the medication might stop working.

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CONFLICT OF INTEREST

The author declares there is no conflict of interest in publishing this article.

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Corresponding author Marek Rajzer, Department of Pathology, University of London, UK, E-mail: MarekRajzer554@yahoo.com

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