Tuberculosis, as known universally, is a chronic infectious disease that can affect any part of the body including mouth. It usually affects the lungs, TB bacilli can spread hematogenously to other parts of the body and this also includes mandible or maxilla. It can occur in the mouth involving the tongue with very unusual features and forms. So oral lesions, although rare, are very important for early diagnosis and interception of primary tuberculosis.

INTRODUCTION

Tuberculosis is a chronic granulomatous disease caused by various strains of mycobacteria, usually mycobacterium Tuberculosis in humans [1]. Robert Koch, a German physician, discovered the Tuberculosis bacillus in 1882 [2]. It has been a worldwide major health problem for centuries. Although the disease’s prevalence reduced decades ago, it still has extremely high prevalence in Asian countries. India accounts for nearly one third of global burden of tuberculosis. It may take any form clinically, but with decline in number, these tuberculosis lesions of oral cavity have become so rare that they are frequently overlooked in the differential diagnosis of oral lesions [3,4].

Although, oral manifestations of tuberculosis has a rare occurrence, but it has been considered to account for 0.1-5% of all TB infections. These lesions are usually secondarily inoculated with infected sputum or due to hematogenous spread, which the students are not aware off. History of Tuberculosis goes back to some 15,000 to 20,000 years ago. It has been found in relics from ancient Egypt, China and India. Archeologists have detected spinal tuberculosis as Pott’s disease in Egyptian mummies [5]. It was known as King’s evil. In the 18th century, it reached its peak prevalence of, as much as, 900 deaths per 100,000 and was termed as white plague. It was considered as a stigma in the society and even compared to a ‘devouring dragon’ in some parts of Europe.

After Robert Koch demonstrated the causative organism in 1882, Edward Livingston Trudeau in 1884 started the concept of isolating these patients from the society, treating them with rest and nutrition [5]. In the year 1904, National Tuberculosis Association (American Lung Association) came into being [5]. Later, Bacillus Calmette Guerin was invented by Albert Calmette and Camille Guerin in Lille, France in 1908. But it was first used in humans in 1921. Thus, it made a revolution and now this vaccine is counted in WHO’s list of most essential medication for basic health system. Despite of the fact that, the incidence of tuberculosis is towards a downfall in today’s times, complete eradication of this disease seems difficult due to concomitant infections of HIV and developing extensively resistant strains causing Tuberculosis. The objective of the study is to assess the awareness of tuberculosis among students.

MATERIALS AND METHOD

A descriptive design using survey method was used to determine the oral manifestation of tuberculosis. Subjects were Indians including men and women. Convenient sampling technique was used to select the participants. Data was collected using a questionnaire. The questionnaire consists of demographic profile and the questionnaire was also related to knowledge regarding tuberculosis among students. Closed ended questionnaire was constructed with a total of 10 items.
designed to assess the knowledge regarding tuberculosis. In this survey, a total of 100 subjects participated. Descriptive statistics was used for data analysis. The results were analysed and presented in tables and figures as well as pie charts. Informed consent was obtained from the participants before the data collection.

RESULTS AND DISCUSSION

The mouth is a mirror, it reflects general health and disease. Whenever there is any disease in body its symptoms are shown in the oral cavity. This survey was done to experiment if there is any serious condition when the individual has tuberculosis. The number of participants who selected YES (73%) and NO (21%) for the question “Are you aware that tuberculosis is an airborne disease”? This shows that 73% in average are aware that tuberculosis is an airborne disease, and about 21% are not aware that tuberculosis is an airborne disease, and 40% know that the TST/PPD is the best way to diagnose tuberculosis.

The subjects, in which 67% are aware that there are treatments and preventions for tuberculosis and 25% didn’t know that there are treatments and prevention for tuberculosis.

CONCLUSION

The study shows that the participants have good awareness about tuberculosis. Many of them have the education or background knowledge on tuberculosis. Students are aware of tuberculosis. Awareness among students regarding the tuberculosis can help in eliminating any negative image of the procedure that may have been caused due to lack of adequate information. As this survey was conducted in a limited group of students, further studies are needed to be conducted amongst a larger group of students.

Acknowledgement

The authors wish to thank Saveetha Dental College and hospitals for the approval and permission to conduct the study. The participants are highly appreciated for their contribution in this study.

References


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