Dear Editor,

I read the previous publication on death outcome after successful treatment of smear-positive tuberculosis (TB).[1] Moosazadeh et al. presented a cohort study in Iranian Registry Setting which concluded that the “Positive smear pulmonary TB even after successful treatment has an adverse effect on the patients’ survival and leads to a decrease in their survival rate in the long run.”[1] I agree with the cohort methodology and survivals’ data analysis of such an evidence. However, I am concerned about stratification[2] to analyze separately the effect of either diabetes, renal disease, cancer, previous TB treatment, or age group. I am wondering how the adjustable effects’ result after these variables are stratified with death status in different population settings.

Furthermore, strategy of directly observed treatments therapy is an established approach to mitigate TB burden, particularly in developing countries.[3] The study of Moosazadeh et al. may reflect on this strategy in a way. A side effects’ study is essential to confirm for further.

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Conflicts of interest

There are no conflicts of interest.

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