

Table1 Response rates for medics (medical students and paramedics) and non-medics (arts and social sciences students) on knowledge statements about tuberculosis (TB)

Variable	% correct response		P-value ^a	OR	(95% CI)
	Medics (n = 142)	Non-medics (n = 133)			
<i>Knowledge factors</i>					
An AIDS patient could be infected with the agent causing TB even if Mantoux test is negative	52	15	0.00	5.96	(3.34–10.64)
Two-weeks treatment with antibiotics ensures cure of TB	96	93	0.34	1.66	(0.57–4.80)
<i>Mycobacterium</i> could be dormant for many years and get reactivated	81	40	0.00	6.46	(3.73–11.17)
Protection against TB can be established by chemoprophylaxis	48	58	0.08	0.66	(0.41–1.06)
There are > 30 million deaths/year because of TB infection worldwide	60	79	0.00	0.40	(0.23–0.68)
All immigrants to Oman should be screened for <i>Mycobacterium</i>	81	77	0.43	1.27	(0.70–2.31)
Incidence of TB in Oman is high	79	87	0.10	0.58	(0.30–1.11)
Oman is a country which is free of TB	99	95	0.12	3.34	(0.66–16.83)
BCG vaccine ensures 100% protection against TB	87	92	0.17	0.57	(0.25–1.28)
Close contact with a patient having TB is harmless	89	83	0.20	1.56	(0.78–3.13)
Simple precautions like wearing mask, washing hands and good ventilation are helpful while taking care of a TB patient	83	72	0.03	1.92	(1.07–3.43)
I feel uncomfortable while talking to a patient with TB	55	38	0.00	2.02	(1.24–3.29)
A patient with TB must not share kitchen tools (plates, spoons, glasses, etc.) with others	36	50	0.02	0.56	(0.35–0.92)
Keeping a patient with TB at home carries the risk of infecting others	72	55	0.00	2.12	(1.28–3.52)
<i>Risk factors</i>					
TB is caused by a virus	81	46	0.00	4.96	(2.89–8.52)
Poor living conditions, crowdedness and refugee camps are good environments for transmission of TB	92	87	0.17	1.75	(0.79–3.88)
HIV epidemic is the main reason behind the new outbreaks of TB worldwide	71	29	0.00	6.16	(3.65–10.39)
You can get TB by drinking raw milk from an infected animal	55	41	0.02	1.73	(1.07–2.79)
The commonest mode of transmission of TB is through inhalation of <i>M. tuberculosis</i> in aerosols and dust	81	71	0.05	1.77	(1.01–3.10)

Table 1 Response rates for medics (medical students and paramedics) and non-medics (arts and social sciences students) on knowledge statements about tuberculosis (TB) (concluded)

Variable	% correct response		P-value ^a	OR	(95% CI)
	Medics (n = 142)	Non-medics (n = 133)			
Diagnosis factors					
A 1-week dry cough is suggestive of TB	67	63	0.46	1.20	(0.73–1.98)
Every patient with TB coughs out bloody sputum	58	46	0.04	1.64	(1.02–2.65)
A person could be infected with TB but show no clinical symptoms throughout life	36	10	0.00	5.23	(2.68–10.20)
Disseminated TB does not involve meninges and bones	92	80	0.01	2.63	(1.27–5.46)
TB is only confined to the respiratory tract	91	73	0.00	3.68	(1.85–7.32)
TB is diagnosed using blood smears	59	61	0.79	0.94	(0.58–1.52)
Night fever and sweating are symptoms of patients with TB	67	46	0.00	2.44	(1.49–4.00)
A positive Mantoux test means a definite TB infection	89	89	0.99	1.01	(0.47–2.18)
A tuberculin test is essential to diagnose suspected cases of TB	39	88	0.00	0.09	(0.05–0.16)

OR = odds ratio, the odds of a medical person getting the correct answer versus a non-medical person.

^aTwo-sided P-value for testing equality of proportions.