EDITORIAL VIEW OF THIS ISSUE

The development and distribution of diseases, infections, and non-infectious conditions are influenced by personal and social attitudes and behaviours, among many other determinants. A successful plan to eradicate or control a disease is not merely a matter of prescribing a drug or providing a vaccine to the people in a community, but also of addressing and eliminating the false and detrimental social beliefs that may hinder the effectiveness of any therapy.

Stigma associated with a disease is one of the most important factors that should always be addressed. Stigma is defined in the Cambridge dictionary as " A strong feeling of disapproval that most people in a society have about something, especially when this is unfair".[1] In medicine, the WHO defines social stigma as "A negative association between a person or group of people who share certain characteristics and a specific disease, leading to stereotyping, discrimination, and social isolation of affected individuals or groups." Tuberculosis (TB) stigma refers to the negative labelling, rejection, or discriminatory attitudes and actions directed toward people with TB, often extending to their families. This stigma is rooted in stereotyping and negative traits associated with TB and the communities affected by it. It can have profound impacts on individuals' physical, mental, social, and economic well-being.[2]

Stigma associated with diseases, particularly tuberculosis (TB), is not new and has been studied in many countries. It is reported in studies from developing countries that about 50- 88 % patients with TB may have a social stigma, especially those who are young, from rural areas, have low levels of education, or suffer from depression.[3,4] and this stigma may significantly lower health-related quality of life (HRQoL),[5] causing delay in diagnosis and poor treatment adherence, thus undermining TB control efforts,[6] and can result in serious social consequences, including social rejection, job loss, and familial exclusion.[7]

Now, the critical question is whether decreased TB stigma affects TB morbidity or mortality. The answer remains unknown, as no study has addressed this question in a design with a high level of evidence.[8] However, this should not be an excuse to combat the stigma among patients with TB.

In Iraq, research about stigma among TB patients and its impact on the diagnosis and treatment is limited. In this issue, we published a research article aimed at measuring the prevalence and determinants of stigma among patients with TB in Baghdad in 2023.[9] Hopefully, this will illuminate this dark corner that may hinder our quest to diagnose and treat TB effectively.

Shakir M. Muhammed
Editor-in-Chief
chiefeditor@iraqinmj.com

REFERENCES

1. Cambridge Dictionary. Stigma. Available at: https://dictionary.cambridge.org/dictionary/english/stigma. Accessed on 20 June 2025.
2. World Health organization, Stigma of TB. Avaialble from: https://tbksp-test.who.int/en/tbai?search_api_fulltext=stigma%20of%20TB.
3. Stanikzai MH, Rahimy N, Baray AH, Anwary Z, Ahmad M, Sayam H. High stigma prevalence and associated factors among TB patients in Southern Afghanistan: A multi-center cross-sectional study. *Indian J Tuberc*. 2024;71 Suppl 2: S203-S207.
4. Ashaba C, Musoke D, Wafula ST, Konde-Lule J. Stigma among tuberculosis patients and associated factors in urban slum populations in Uganda. *Afr Health Sci*. 2021 Dec;21(4):1640-1650.
5. Courtwright A, Turner AN. Tuberculosis and stigmatization: pathways and interventions. *Public Health Rep*. 2010;125 (Suppl 4):34-42.
6. Adejumo, O.A., Jinabhai, C., Daniel, O. et al. The effects of stigma and social support on the health-related quality of life of people with drug-resistant tuberculosis in Lagos, Nigeria. *Qual Life Res* 2025; 34, 1305–1316.
7. Baral, S.C., Karki, D.K. & Newell, J.N. Causes of stigma and discrimination associated with tuberculosis in Nepal: a qualitative study. *BMC Public Health* 2007;7:211.
8. Courtwright A, Turner AN. Tuberculosis and stigmatization: pathways and interventions. *Public Health Rep*. 2010;125 (Suppl 4):34-42.
9. Abood I. Prevalence and determinants of stigma among a sample of patients with pulmonary tuberculosis in Baghdad, Iraq, 2023. *Iraqi New Medical Journal* 2025;11(22):127-143.