

Rise in drug-resistant TB

While the incidence of drug-susceptible (DS-TB), which is treated with the antibiotics rifampicin and isoniazid, has marginally declined in the past decade, there has been a marked increase in drug-resistant TB (DR-TB).



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"We are seeing a growing number of patients who have never been treated for drug-susceptible-TB presenting with drug-resistant TB. This means they are infected by drug-resistant TB," Dr JN Thandi Dlamini-Miti, DR-TB technical advisor at Right to Care, says.

"DR-TB requires a patient to take more drugs and for longer periods, from nine to 24 months, which places a serious burden on patients, families and the state. Side-effects are more common and severe."

Right to care is working with the Department of Health to increase the early diagnosis of TB, detect resistance, address treatment barriers, improve patient adherence and enhance infection control. "This involves simple actions like sneezing or coughing into the elbow or a tissue and ensuring windows are open - at home, on public transport and in health facilities," she says.

Early diagnosis and treatment of DR-TB is vital to preventing its spread.

Expanding the programme

"The National Department of Health's decentralisation policy to expand MDR-TB treatment from specialised DR-TB hospitals to regional and district hospitals and primary healthcare facilities has been an important intervention. It allows treatment to start sooner, improves adherence and supports patients closer to their homes. USAID funds our activities in certain districts where we support the decentralisation programme," says Dlamini-Miti.

There are ongoing advances in TB treatment. "The roll out in SA of the DR-TB drug bedaquiline, which was the first new TB drug in nearly 50 years, is being followed by a newer drug, delamanid. We are supporting the National TB Programme with MCC registration of sites and clinicians, training, data management, drug distribution and monitoring." Delamanid has been donated to SA by the Japanese drug maker Otsuka Pharmaceuticals," she says.

Adherence

Adherence is a critical factor because poor adherence can lead to further drug resistance and even death. Some MDR-TB regimens require a patient to take 17 pills a day and patients may experience side-effects which include hearing problems. "Monitoring by a multi-disciplinary team is therefore vital. Social workers, dieticians, audiologists, counsellors, pharmacists, nurses and doctors should all be involved in a patient's progress," says Dlamini-Miti.
"In SA, TB also contributes to approximately 25% of HIV related deaths. It is estimated that around 70% of new adult cases of tuberculosis are co-infected with HIV. The risk of TB in people living with HIV can be significantly reduced by anti-retroviral therapy and isoniazid preventive therapy, but adherence remains the key challenge" she says.
World TB Day takes place on 24 March 2018.
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