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ADVERSE EVENTS IN PATIENTS WITH MULTI DRUG RESISTANT TUBERCULOSIS: RESULTS OF A PROSPECTIVE COHORT STUDY AT TERTIARY CARE LEVEL

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Introduction: Drug-resistant tuberculosis (DR-TB) is a global public health crisis. According to Global Tuberculosis report 2017, treatment success rates of multi-drug-resistant tuberculosis (MDR-TB) and extensively drug-resistant TB (XDR-TB) patients are 46% and 29%. Henceforth one of the major obstacles in achieving successful treatment outcomes in DR-TB is adverse events affecting the adherence to the both first-line and second-line drugs.

Aim: To evaluate the frequency of adverse events due to the second-line drugs in MDR-TB patients during intensive phase of treatment.

Settings & Design: A prospective cohort study was conducted at DOTS Plus site at AIIMS, New Delhi. 81 consecutive MDR-TB patients were recruited from June 2014 to May 2015 and were given standardized revised national control tuberculosis programme (RNCTP) drug-regimen. Patients were followed-up during intensive phase of treatment and adverse events were primarily recognized with clinical evidence and/or laboratory investigations.

Results: A total of 91 adverse events were reported in 52 (64.1%) patients. Only 1.2% of the patient stopped treatment and 9.8% required removal of the suspected drug(s) from the regimen due to adverse events. The grouped adverse events were most commonly gastrointestinal (70.6%), arthralgia (10.9%), ototoxicity (6.4%), psychiatric (5.5%), and hypothyroidism (2.1%). Nine (11%) patients had serious adverse events requiring discontinuation or substitution of drugs that included psychiatric disturbances in 6(7.4%) followed by hearing loss and tinnitus in 3(3.7%).

Conclusions: In India, programmatic management of drug resistance tuberculosis guidelines (PMDT) provides guidance for management of DR-TB but cure rate are undesirable and one of the major issue to be catered is adherence which can assure for successful treatment outcomes.

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