

European Respiratory Society Annual Congress 2012

Abstract Number: 3086
Publication Number: P2579

Abstract Group: 10.2. Tuberculosis

Keyword 1: MDR-TB **Keyword 2:** Monitoring **Keyword 3:** No keyword

Title: Clinical analysis of adverse reactions to second line anti TB drugs

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Body: Introduction: Adverse reactions to second line anti T B drugs not only leads to permanent system damage in patients but also MDR/XDR treatment failure Aims and Objective: MDR/XDR TB patients on second line anti T B drugs were analysed clinically for adverse reactions. These patients underwent pretreatment counselling for possible adverse reactions to improve treatment adherence. Methods: 146 patients with MDR/XDR T B on second line drugs were analysed. These adverse reactions were classified in to two groups. Severity based and system based. Severity further classified as 1) mild not requiring discontinuation of drugs 2) those requiring temporary discontinuation 3) requiring permanent discontinuation. Results: 47.9 % had no adverse reactions. 21.3% had mild reactions. 11.6% required temporary discontinuation and 19.2% required permanent discontinuation. Gastrointestinal were commonest system based reaction effecting 30% of patients Followed by Peripheral neuritis 18.4%, Endocrinal (hypothyroidism) 10.5%, Auditory and vestibular (deafness) 9.2%, Ophthalmic (optic neuritis) 6.5%, Hepatic 5.2%, Joint pains 5.2%, Psychiatric disturbance 1.3% and 19.7% patients had more than one system involved. Majority of patients with peripheral neuritis, optic neuritis and hypothyroidism required discontinuation of offending drug. Conclusion: Significant number of patients developed adverse reaction including very severe reaction requiring discontinuation of drug which may effect treatment outcome. close monitoring and patient counselling is necessary to prevent permanent system damage and discontinuation of therapy.