ANTIMICROBIALS - I

ANTITUBERCULOUS THERAPY-CURRENT PRACTICE

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Abstract: Tuberculosis affects all age groups. Treatment for tuberculosis has been standardized having a 2 months intensive phase with four first line drugs followed by a 4 months continuation phase with three first line drugs given daily. Adjunctive steroids are useful in central nervous system disease and pericardial involvement. Adverse reactions to drugs, though uncommon, need to be looked for and managed appropriately. Standard regimens for treatment of resistant tuberculosis in India follow World Health Organization guideline. When there is an infectious pulmonary tuberculosis patient in the family, tuberculosis preventive treatment has to be given to all family members irrespective of age after ruling out active tuberculosis. All children after completion of treatment need to be followed up for two years.

Keywords: *Children, Treatment, Tuberculosis, Resistant, Preventive therapy.*

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Points to Remember

- Only one treatment schedule is recommended (2HRZE/4HRE) for all newly diagnosed TB whether microbiologically confirmed or clinically diagnosed.
- Continuation phase can be extended in neurological, skeletal and disseminated TB.
- Children must always be followed up for 2 years after completion of treatment for TB.
- Drug resistant TB in children is to be treated with shorter or longer regimen based on extent of disease and severity.
- All household contacts of adult index pulmonary TB patients have to be given TB preventive treatment after ruling out active disease, regimen being different for drug sensitive and drug resistant strains.

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