

EXPERIENCE OF TIOTROPIUM BROMIDE USE IN BRONCHOOBSTRUCTIVE SYNDROME IN NEWLY DIAGNOSED PATIENTS WITH DESTRUCTIVE LUNG TUBERCULOSIS

*M. N. Gryshyn, O. B. Tymchenko, E. A. Ohota,
N. A. Shybayeva, N. N. Auhadiev,
E. M. Dzhemileva, M. M. Gryshyn*

Summary

The aim was to study the influence of bronchodilator therapy on the results of treatment of patients with destructive lung tuberculosis associated with bronchoobstructive syndrome. The patients of main group (46 subjects) received Spiriva® 18 mcg daily delivered by HandiHaler® in combination with standard anti-tuberculosis therapy. Tiotropium therapy was initiated at the moment of admission to the hospital and it was conducted until resolution of acute manifestations of disease (in average from 30 to 60 days). In 19 patients with newly diagnosed destructive lung tuberculosis and bronchoobstructive syndrome (control group) tiotropium was not prescribed in complex therapy. We have observed the shortening of terms of destructive cavity closure in patients with newly diagnosed destructive lung tuberculosis associated with bronchoobstructive syndrome. Use of tiotropium bromide during main course of anti-tuberculosis chemotherapy allowed to decrease hospital stay of patients with newly diagnosed lung tuberculosis with associated bronchoobstructive syndrome.