

EVOLUTION AND EFFECTIVENESS OF ANTIMYCOBACTERIAL THERAPY IN PATIENTS WITH PULMONARY TUBERCULOSIS RELAPSE

***V. M. Petrenko, S. O. Cherenko, I. B. Byalyk,
M. V. Pohrebna, L. M. Tsygankova,
N. A. Lytvynenko, O. V. Ivankova,
O. R. Tarasenko, Yu. O. Senko, V. V. Davydenko***

Summary

There was observed gradual increase of drug resistant Mycobacteria in patients with the relapses of pulmonary tuberculosis during the last 25 years. In 1984-1990ss resistant (predominantly mono-resistant) MBT were isolated in 21,2 % of cases. In that period the main course of chemotherapy using 3-4 first-line medications was quite effective: the rate of negative smears/cultures reached 94,2 %, cavern closure — 82,2 % of cases. In 1996-2000 resistant MBT were revealed in 56,7 % of cases (26,7 % of those cases were multi-resistant). In that period an intensive phase of treatment consisted of 2 months with 5 medications and 3rd month — 4 medications. However effectiveness of treatment was lower comparing with previous years. The rate of negative smears/cultures was less than 85 %, while cavern closure was in 63–73 % of cases. In 2001–2008 drug resistant relapses of tuberculosis were diagnosed in 92,9 % of cases (81,5 % were multi-resistant). As a result of this a standard regimen of chemotherapy, consisted of first-line medications, became ineffective. In majority of patients from this cohort it became necessary to adjust both standard and individual regimens of chemotherapy using mostly second-line medications. As a consequence, the effectiveness of chemotherapy became lower than in 80–90 years of previous century.