MULTIDRUG-RESISTANT TUBERCULOSIS: PREVALENCE AND PROFILE OF THE RESISTANCE OF MYCOBACTERIUM TUBERCULOSIS TO ANTIMYCOBACTERIAL THERAPY

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Abstract

The aim was to determine the prevalence of multidrug-resistant (MDR) tuberculosis in Ukraine and profile of Mycobacterium tuberculosis (MBT) resistance to antimycobacterial drugs (AMBD).

Materials and methods. The data of the official statistics forms on tuberculosis had been studied for 2009-2010, in particular reporting forms № 4, 4-1, 8-3.

Results. First, the data of official statistics on MDR demonstrated that in category IV about 62,5-95,5 % were the patients from the group "treatment after the interruption", "treatment after the failure of the first course of treatment, "treatment after of the failed re-treatment". The number of areas in which a rate of patients from group "treatment after a failed re-treatment" had increased significantly, exceeding mean Ukrainian value. It was shown a reduction in number of in MBT susceptibility tests (15,685 against 19,051 in 2009) and the number of administrative areas with high resistance (3 versus 12 in 2009). In the structure of resistance more than half of all cases were the cases of multiple drug-resistance, which had grown in 2009-2010 by 3.2 %. The most prevalent was resistance to 3-4 drugs (HRSE — 44,5-45,3 %, HRS — 30,7-29,9 %). In 8 administrative areas the value of resistance exceeded mean Ukrainian value.

Conclusions. 1. The situation with of MDR tuberculosis prevalence in Ukraine is dangerous. An increasing number of epidemiologically dangerous therapeutically hopeless patients and the profile of MBT resistance are the indicators of further worsening of epidemic situation. 2. The decrease of the number of susceptibility tests in most administrative areas do not contribute to the completeness of detecting of drug-resistant tuberculosis. 3. The results of monitoring of MDR tuberculosis can be used for assessment of the epidemiological situation and predicting of its development, determining the need for medicines on a territorial basis. Current system of control of MDR tuberculosis needs improvement.

Key words: drug-resistant tuberculosis, Mycobacterium tuberculosis, antimycobacterial drugs.

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