

**THE EFFICACY OF FLUOROQUINOLONES IN TREATMENT  
OF PATIENTS WITH COMORBIDITY —  
MULTIDRUG-RESISTANT TUBERCULOSIS OR EXTENSIVELY  
DRUG-RESISTANT TUBERCULOSIS  
AND HIV INFECTION**

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*Abstract*

96 HIV-positive patients with multi-drug-resistant tuberculosis (MDR-TB), were enrolled in open, randomized study. The tuberculosis with extensive resistance — XDR-TB was registered in 25 %, fluoroquinolone or aminoglycoside resistance — in 25 %, fluoroquinolone and aminoglycoside susceptibility — in 25 %, and with undetermined susceptibility to second line antibiotics — in 25 % of cases. All patients were distributed into four groups (each consisted of 24 patients) with similar profile of resistance and presence of HIV infection. Chemotherapy regimen in group 1 was enforced by moxifloxacin (Mfx), in group 2 — gatifloxacin (Gfx), in group 3 — levofloxacin (Lfx) and in group 4 — ofloxacin (Ofx).

Treatment efficacy of Mfx, Gfx and Lfx in treatment regimens for MDR-TB in HIV-positive patients was similar but significantly differed from Ofx. However, the same level of adverse reactions was observed, with good tolerability of fluoroquinolones in most cases and compatibility with first-line drugs for HIV antiretroviral therapy.

Mfx, Gfx, Lfx and Ofx were effective in anti-tuberculosis treatment regimens of MDR-TB with fluoroquinolone and aminoglycoside susceptibility. Mfx and Gfx were effective in treatment of MDR-TB with ofloxacin-resistant mycobacteria HIV-positive tuberculosis patients.

**Key words:** multidrug-resistant tuberculosis, HIV infection, fluoroquinolones, complex treatment.

**Ukr. Pulmonol. J. 2016; 1:49–52.**

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