

Drug-resistant TB research programme launched in PE

A new programme in the fight against drug-resistant tuberculosis (DR-TB) that is expected to slash treatment times and minimise side-effects has been launched.



DR-TB, particularly rifampicin resistant TB (RR-TB), poses a serious threat to the goal of TB eradication both in South Africa and worldwide. Until August 2018, the treatment of DR TB infection involved nine-11 months of medicines, a painful injection and a significant risk of permanent hearing loss. Only 50% of DR-TB patients were successfully treated.

The Beat Tuberculosis programme will be conducted in Port Elizabeth, an area in South Africa that bears a disproportionately high burden of RR-TB. It is expected to lead to a safer, more tolerable and more effective all-oral regimen for the treatment of DR-TB.

This clinical trial has been made possible by the United States Agency for International Development (USAID) which awarded a research grant to the Clinical HIV Research Unit (CHRU) of the Wits Health Consortium (WHC) based on its track-record as an internationally acclaimed clinical trial unit.

“Beat Tuberculosis will see treatment provided to participants or patients with DR-TB that involves a combination of the new and repurposed medications used together for just six months.

“There are over 15,000 cases of RR-TB diagnosed every year in South Africa. It is mostly transmitted from one person to

another and not acquired because an individual was not adherent to their TB medicines. Approximately 1,000 people are diagnosed with extensively DR-TB in South Africa every year which means that the four most commonly used TB medications will not cure them.

“We are optimistic that this programme will add to a number of gains already recorded in the treatment of DR-TB under the leadership of Dr Norbert Ndjeka, director in the DR-TB Directorate of the National Department of Health” says Dr Francesca Conradie, principal investigator at CHRU.

These include:

- Better diagnostics tests which have been rolled out since 2011 enabling earlier detection of resistance.
- Decentralised care of those with DR-TB enabling patients to get their treatment closer to where they live and work.
- The inclusion of Bedaquiline, the first new medication registered in over 50 years for the treatment of RR-TB, in the National Guidelines within three years of registration.
- The provision of Bedaquiline to all people within our borders that had RR-TB, an intervention that halved the mortality of patients with DR TB in South Africa.
- Confirmation of sufficient evidence to stop the use of the injectable agents and to give an all oral nine-month course of treatment instead.
- The addition of other new or repurposed medications including linezolid, delamanid and clofazimine for the treatment of RR-TB.

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