

DOI: 10.5152/TurkThoracJ.2019.177

[Abstract:0035] OP-031 [Accepted: Oral Presentation] [Tuberculosis]

Extensively Drug Resistant (XDR) Tuberculosis: 14 Cases

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Objectives: XDR TB involves resistance to isoniazid and rifampicin in addition to any of the fluoroquinolones and at least one of the injectable second-line drugs that take part in the treatment of multidrug-resistance tuberculosis (MDR-TB) as the most two important groups of drugs. We aimed to share our XDR-TB cases that are difficult to treat and manage.

Methods: In our study, we evaluated the patients who were diagnosed and treated as XDR TB between the years 2014-2018 in our TB clinics. Patients' age, gender, nationality, resistance patterns, treatments regimens, treatment results, sputum and culture conversion were evaluated.

Results: 14 patients diagnosed and treated as XDR-TB were included in our study. The average age of patients was 34.3 ± 10.7 . 8 of 14 patients were male. Nationalities were saved as; Azerbaijan: 4, Turkmenistan: 7, Republic of Turkey: 3. 11 cases were previously treated with first and second line tuberculosis drugs. Mean resistant drug number was determined as 8. Treatment period was planned as 24 months. Among all the treatments Linezolid was used in 13, Clofazimine in 9, Capreomycin in 8, and Bedaquiline in 2. Culture conversion was revealed as 3.08 ± 2.39 months. Treatment results evaluated as, cure: 5, treatment completed: 1, treatment default: 2, undertreatment: 6.

Conclusion: XDR TB threatens global TB control. Due to migration from countries with higher resistance rates, we started to see more XDR TB cases in our society. Restrictions of new drugs and treatment regimens make it difficult to treat XDR TB. New drugs and further treatment regimens are needed.

Keywords: Extensively drug resistant tuberculosis, treatment, outcome