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Management and treatment outcomes of multi drug resistant pulmonary tuberculosis in Khyber Pakhtoonkha, Pakistan

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ulti drug resistance tuberculosis (MDR-TB) is an epidemiological issue and treatment outcomes are often unsuccessful as Multi drug resistance tuberculous (MLR 12) to an epidemonogene and the second process of the second process (MLR 12) to an epidemonogene and to an epidemonogene a management and treatment outcomes of MDR-TB in Pakistan. In this study we assess management and predictors of poor treatment outcomes among MDR-TB patients enrolled in the study site. In the current retrospective cohort study, 254 MDR-TB patients registered at the Programmatic Management of Drug resistant TB (PMDT) Unit of Mufti Mehmmod Memorial Teaching Hospital (MMMTH) Dera Ismail Khan, Pakistan, between 23rd October 2013 and December 2015 were included. Patients were followed until an outcome was recorded or May 2016. Analysis of data was performed using SPSS version 18, a special Performa was used for collection of data. Out of 254 patients, treatment outcome was available for 124 patients, 66 (53.2%) were cured, 10 (8.1%) defaulted, 8 (6.4%) treatment failure and 40 (32.3%) died. In univariate regression analysis, predictors of unsuccessful outcomes were rural area patients (odd ratio (OR)=0.417; 95% confidence interval (CI): 0.18-0.937; p=0.03), age >44 years (OR=0.250; 95% CI: 0.114-0.119; p=0.001), resistant to oflaxacin (OFX) (OR=2.944; 95% CI: 1.361-6.365; p=0.005), second line drugs resistant (SLDs) patients (OR=3.441; 95% CI: 1.579-7.497; p=0.001) and lung cavitations (OR=0.22; 95% CI: 0.007-0.067; p=0.001), while in multivariate regression analysis, predictors of poor outcomes (failure, default and death) were age >40 years (OR=0.249; 95% CI: 0.075-0.828; p=0.023), lung cavitations (OR=0.022; 95% CI: 0.007-0.072; p=0.000) and rural area patients (OR=0.143; 95% CI:0.052-0.772; p=0.032). In the present study treatment outcomes was encouraging, however should receive special attention to the particular predictors of unsuccessful treatment outcomes for better management of MDR-TB. Early diagnosis and management of mild adverse effects can help prevent regimen modification and may improve in treatment outcomes.

Biography

Faisal Younis has completed his MBBS from Karachi in 2011 and completed Internship from Lady Reading Hospital Peshawar. He has completed Postgraduate training in Pulmonology and TB from Lady Reading Hospital Peshawar. Currently he is working as In-Charge of Pulmonology and TB Unit at Mufti Mehmood Memorial Teaching Hospital Dera Ismail Khan. He is also the In-Charge of PMDT (Programmatic Management of Drug Resistant TB) site and BSL-2 (Bio Safety level 2) culture lab Mufti Mehmood Memorial Teaching Hospital. He is the regional Coordinator (southern regions) for all TB related activities.

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