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Tuberculosis meningitis presenting in children - clinical profile and ADR: A case report

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Introduction: Tuberculosis Meningitis (TBM) is a severe infection; it causes death or neurological deficits. TBM starts as a primary infection through inhalation and settles in the lungs. Medicines which are used in the treatment will have the ability to alter the body functions.

History: A 3 year old female child was admitted with complaints of involuntary movements of all the 4 limbs during sleep, constriction of pupils, rigorous involvement of all four limbs followed by episodes of seizures, for which she was treated with phenytoin. Patient was previously diagnosed with tuberculosis. She was given treatment with antituberculosis therapy of 2HRZ+10HR. After 9 months her serum bilirubin levels were elevated, and diagnosed as jaundice, for which she was hospitalized again.

Discussion: Literatures suggest that primary seizures in patients with tuberculosis can be due to Adverse Drug Reaction of anti-tuberculosis therapy. In this case, jaundice has been reported as an Adverse Drug Reaction of anti-tuberculosis therapy. The combination of rifampicin and isoniazide can increase the risk of hepatotoxicity.

Conclusion: Drug induced liver disorders can be managed by withdrawal of the treatment or reducing the dose of the drug. The pharmacist's has a key role in managing the tuberculosis with collaboration of other health care professionals to improve adherence and the health of patient.

Biography

Sruthi Rajanala is pursuing her Doctor of Pharmacy (internship) in Annamalai University, Chidambaram, Tamil Nadu. She has presented papers in national and international conferences.

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