

Notes:

Protect your family and friends from TB – take all your TB medicine

Remember the TB Nurse is here to help and advise throughout your treatment. Please contact your TB Nurse if you feel unwell on your treatment or if there is anything you are unsure of regarding your medication.

Your TB Nurse is:

Your Hospital Doctor is:

Contact no:

Email:

TB Alert is a unique charity, raising awareness of Tuberculosis in the UK and supporting the work of the NHS by providing information to patients. We support projects in developing countries ensuring that all patients receive proper treatment. With your support we can make a positive, worldwide impact on Tuberculosis and save more lives.

For further information, copies of this leaflet, or to make a donation please contact:

TB Alert, 22 Tiverton Road, London NW10 3HL
 Tel: 020 8969 4830
 Email: helping@tbalert.org

www.tbalert.org

Information given in this leaflet regarding Multi-Drug Resistant TB is intended to give general information about the subject. It is not intended as a substitute for the knowledge, expertise, skill, and judgment of your TB nurse/doctor or other health-care professionals. None of the information contained in this leaflet is intended to be used for decisions on diagnosis or treatment. Questions and concerns regarding diagnosis and treatment should be directed to a health care professional.

Original development work by the North West London TB Network



Multi-drug Resistant Tuberculosis (MDR TB)



A company limited by guarantee Registered in England No. 3806528 Registered Charity No. 1071886 design: workamp london 020 8352 8300



What is Multi-Drug Resistant Tuberculosis?

MDR TB occurs when TB germs become resistant to the two most powerful antibiotics normally used to treat TB. This means that these medicines will not work effectively as they can no longer kill the TB bacteria.

When do you suspect that someone has MDR TB?

Samples which contain TB germs can be tested in the laboratory to see if they will be killed by different antibiotics. If they are not, it is likely that the patient will not get better on the usual TB medicines and this may suggest MDR TB.

Why do people get MDR TB?

1. TB can become resistant during treatment if the treatment taken was for some reason inadequate, for example:
 - ⦿ If the patient does not take the medicine regularly as prescribed or does not complete a full course of treatment.
 - ⦿ If the patient cannot fully absorb medicines, for example, due to vomiting.
 - ⦿ If the medicines are not prescribed or dispensed correctly.
 - ⦿ If the medicines are of poor quality.
2. The TB may be resistant from the start because the person the infection was caught from had drug resistant TB.

MDR TB is not more infectious than ordinary TB but the medicines used against it are less effective and have to be taken for much longer. A person with MDR TB is therefore infectious for longer than a person with TB which is sensitive to the usual medicines (drug sensitive TB).

Why is MDR TB a problem?

MDR TB is not more infectious than drug sensitive TB but it is more difficult to treat.

The medicines used to treat drug resistant TB have more side effects and are less effective than medicines used to treat drug-sensitive TB. This means that patients with MDR TB need treatment for a longer time and may be more unwell. They are also more likely to be admitted to hospital for treatment.

For how long will I be infectious?

It will depend on how you respond to the drugs you are treated with, and each case of MDR TB is different.

Because the TB is resistant to the usual medicines you may be infectious for many weeks or even months.

How long will I need to take treatment?

A course of drug-sensitive TB medicines lasts for at least six months. MDR TB treatment may last for eighteen months or longer.