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Title: The risk factors of the TB death among case of initial treatment failure and retreatment after default

Dr. Yoon-sung 14785 Park optimus@korea.kr<sup>1</sup>, Dr. Sung-Jin 14786 Hong sungjhong@naver.com MD<sup>1</sup>, Dr. Seunghee 1988 Cho hoi644@korea.kr<sup>1</sup>, Prof. Dr Hyonggin 1989 An hyonggin@korea.ac.kr<sup>2</sup>, Dr. Hyungmin 1990 Lee sea2sky@korea.kr MD<sup>1</sup>, Dr. Eun-hee 14169 Cho cho6404@korea.kr MD<sup>1</sup> and Dr. Sang-suk 14176 Shin ss9390@hanmail.net<sup>1</sup>. <sup>1</sup> Division of HIV and TB Control, Korea Centers for Disease Control and Prevention, Choongcheongbukdo, Republic of Korea and <sup>2</sup> Department of Biostatistics, College of Medicine, Korea University, Seoul, Republic of Korea .

**Body:** Background: Irregular medication is considered to be related to develop MDR-TB. We reviewed chart of patients who failed in the primary treatment to find out drug resistance is associated with death. Methods: The result of chart review study of 76,315 cases who had been charged to Health Insurance Review and Assessment service in 2008, 53,579 cases were confirmed with TB patients. Among these 53,579 patients, 1,410 patients who failed in the primary treatment and treatment after default participated in this study. The data were matched to death cause statistics provided by Statistics Korea. Hazard ratio was calculated using Cox's proportional hazard models to analyze factors associated with death. Results: Among 1,410 patients, 213 were MDR-TB, 29 were XDR-TB. The result of 2.7year follow-up, 123 patients were died, 23 were MDR-TB, 8 were XDR-TB. There seemed no relationships to MDR-TB with death, but the risk for death increased with 3.3 times higher for XDR-TB patients comparing with non-XDR-TB.

The hazard ratio for XDR-TB was 3.3 times higher(95%CI:1.5-6.4), for gastric ulcer was 3.8 times higher(1.4-8.3), for cancer was 3.3 times higher(1.9-5.4), for chronic renal failure was 13.9 times higher(3.8-36.2). Conclusions: The risk for death was increased with XDR-TB in patients who failed in the primary treatment and treatment after default in spite of controling confounding variables.