## **European Respiratory Society Annual Congress 2012**

**Abstract Number: 443** 

**Publication Number: P2689** 

Abstract Group: 10.2. Tuberculosis

Keyword 1: Tuberculosis - mechanism Keyword 2: Children Keyword 3: Treatments

**Title:** The comparative analysis of treatment effectiveness in children and adolescents with MDR TB with anti-TB drugs of the first and second lines

Prof. Dr Tleuchan 3143 Abildaev info@ncpt.kz MD <sup>1</sup>, Dr. Gulbadan 3144 Bekembaeva gbekem@mail.ru MD <sup>1</sup> and Mrs. Larisa 3145 Kastykpaeva kastykpaeva.lari@mail.ru MD <sup>1</sup>. <sup>1</sup> Department of Pediatrics of MDR TB, National Center for TB Problems, Almaty, Kazakhstan, 050010.

**Body:** Target: To study outcomes of treatment with anti-TB drugs of the first and second lines and follow-up results in children and adolescents with TB. Materials and methods: Comparative retrospective cohort study was conducted among 160 children and adolescents. Group I constituted from 80 patients treated with anti-TB of the second line and Group II from 80 patients treated with anti-TB drugs of the first line. Results: Family contact with patients with MDRTB played the great role in 71.0% of patients in the Group I, while among patients of the Group II in 47.5%. Primary TB forms occurred more frequently among patients of the Group II (61.8%), secondary TB forms did among patients of the Group I (81.4%). Frequency of complications was also higher among patients of the Group I. So, bronchial TB was diagnosed in 63.0% and 11.2%, TB pleurisy in 35.0% and 11.2% relatively, hemoptysis, lung tissue destruction and atelectasis were observed in 26.0%, 2.0% and 9% of patients of the Group II. Processes with destruction were in 81.2% of patients of the Group I, and those of the Group II did in 28.2% only. Patients with positive smear were by 2 times more (62.3%) in the Group I than in the Group II (30.0%). MDR: in 100% of both groups culturally only. Thus, analysis of outcomes and follow-up control showed that among patients with MDR TB treated with drugs of the first line 5 (6.2%) patients of the Group II died, while among patients treated with DSL one adolescent only died. Relapse emerged in 12.5% of children and adolescents of the Group II. This fact proves the necessity to administrate the therapy with DSL to the children and adolescents with MDR TB.