

# European Respiratory Society Annual Congress 2012

**Abstract Number:** 4154

**Publication Number:** P2686

**Abstract Group:** 10.2. Tuberculosis

**Keyword 1:** MDR-TB **Keyword 2:** Epidemiology **Keyword 3:** Tuberculosis - management

**Title:** Multidrug-resistant tuberculosis in the western region of Algeria

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**Body:** INTRODUCTION: The MDR-TB is entirely man-made and is the result of a failure in effective implementation of anti-tuberculosis national plan (PNLT). What assessment do we have of curing it in the western region of Algeria? MATERIAL AND METHOD: A longitudinal descriptive study involving 97 patients followed for MDR-TB from January 2005 to December 2009 and put in 2nd line regimen with a duration of at least 21 months and including 05 drugs (Ofloxacin, Ethionamide, Kanamycin, Cycloserine and Pyrazinamide) Inclusion Criteria: Patient with MDR-TB documented to INH and Rifampicin at least. Patient who underwent at least 02 chemotherapy regimens including one eight-month regimen that always have positive smears. RESULTS: Average age: 29 years Extreme age: 15 to 61 years 45% of patients aged between 25 and 34 years. Sex ratio 1,4. 33% of patients from the wilaya of Mostaganem 07 familial cases observed 06 patients are diabetic, one patient with HIV co-infection. 96% of exclusive lung locations 92% of patients received at least 02 treatments before drug susceptibility test Of the 97 patients, 59 are cured, 14 patients in failure, 15 died and 09 have given up treatment. 82,5% of patients have benefited from a drug susceptibility test, the resistance to INH and Rif is observed in 100% of cases, streptomycin in 50% of cases and Ethambutol in 23% of cases. For patients who have finished their treatment, the cure rate is 61%. CONCLUSION: MDR-TB represents a threat which we must face with determination, respecting and reviving the PNLT in order to prevent the emergence of multi- resistant bacilli.