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Title: Trends of MBT drug resistance

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Body: We conducted 2182 MBT sensitivity tests in the tuberculosis hospital, Saratov (Russia), for assessment of mycobacterium tuberculosis (MBT) drug resistance (DR). From 2006 to 2012, MBT DR increased from 67.6% to 87.1%, primary MBT DR doubled - from 36.6% to 71.4%, secondary DR increased from 82.1 to 89.7%. By 2012, multiple drug resistance (MDR) reached 67.2%, including the increase of primary MDR from 16.8% to 40.0, and of secondary MDR from 53.8% to 71.1%. There is a first-line drug DR increase from 2008 to 2012: • DR to H has gone up from 44.1% to 76.8% (primary from 16.8% to 57.1%; secondary from 57.0% to 79.7%) • DR to R increased from 44.4% to 70.9% (primary from 16.8% to 40.0%; secondary from 57.3% to 75.4%) • DR to E increased from 24.2% to 57.9% (primary from 5.6% to 37.1%; secondary from 32.5% to 61.6%) • DR to S increased from 69.2% to 80.1% (primary reached 65.7%, secondary 82.3%, DR among the chronically ill was 93.4%) In 2012, second-line drug DR was 67.5%, primary DR - 40.0%, secondary DR - 72.4%. From 2008 to 2012 • DR to PAS increased from 15.2% to 37.3% (primary 8.6%, secondary 42.2%) • DR to OfI increased from 18.7% to 29.2% (among new patients - 14.3%, secondary is 31.9%) • DR to Capr remained stable - 23.3% (primary increased from 5.9% to 20.0%, secondary did not change - 24.1%) • DR to K has doubled from 26.3% to 50.2% (primary 22.9%, secondary 54.7%) **CONCLUSIONS** The DR reduction trend that emerged in 2011 has been replaced with further DR growth, mainly to the first-line drugs where it has reached alarming proportions. It is vitally important to introduce rapid sensitivity testing methods, as standard chemotherapy regimens (I, II, III) require the use of first-line drugs.