



Treatment outcomes of multidrug-resistant tuberculosis with chronic kidney/liver disease

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Bedaquiline and delamanid are effective and might be safe in patients with chronic kidney or liver disease. MDR-TB patients with these comorbidities receiving bedaquiline and/or delamanid have poor treatment outcomes, probably owing to the comorbidities. <https://bit.ly/3NyDD15>

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To the Editor:

Each year, ~500 000 people worldwide suffer from rifampin-resistant tuberculosis (RR-TB) or multidrug-resistant tuberculosis (MDR-TB; resistance to both rifampin and isoniazid) [1]. Bedaquiline and delamanid are newly developed anti-TB drugs and their efficacies in the treatment of MDR/RR-TB have been well documented in both randomised controlled trials [2, 3] and cohort studies [4, 5]. As these new drugs have become widely used, evidence regarding their efficacy and safety in patients with chronic kidney or liver disease is needed urgently, as these organ impairments can affect drug metabolism or pharmacokinetics [6]. However, as bedaquiline and delamanid received accelerated approval based on phase 2 clinical trials, their effects in patients with comorbidities have not been fully evaluated [2, 3]. Therefore, this study aimed to assess the treatment profiles and outcomes in patients with MDR-TB receiving bedaquiline and/or delamanid in South Korea.