



**Patients and TB: Improving treatment outcomes  
through a patient centred approach and  
access to new treatments**

**5<sup>th</sup> TB Symposium – Eastern Europe and Central Asia  
Ministry of Labour, Health and Social Affairs of Georgia  
and Médecins Sans Frontières**

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# Tajikistan Bedaquiline Case Report

# Tajikistan Bedaquiline Case Report

- Presentation of Patient TJ
- With some comparison to the rest of the cohort (total of 5 patients):
  - median age 31 (range 15-42 years)
  - All had undergone at least 3 months of MDR treatment prior
  - duration of disease ranged from 3 months to 3 years
  - Three were female, 2 male

# Patient TJ

15 and one-half year old female

- Presented March 2015:
  - 10 day history of cough and fever
  - treated with antibiotics without resolution.
- Contact: 17 year old cousin
  - Shared same room as patient
  - Was being treated for pulmonary TB resistant to all drugs tested for.
  - In 5<sup>th</sup> month of therapy
  - Remained smear and culture positive.
- Started Cm, Z , Mfx, Lzd, Cfz, Pto, Cs, Amx/Clav + B6
  - remained smear and subsequently culture positive for first 3 months of treatment.
  - ⇒ **determined to be a good candidate for Bdq by TB Advisor**
- June 2015: Started **Z-Cm-Pto-Cs-Lzd-Cfz-Lfx-Bdq** + B6

# Patient XX

- Adverse events
  - weakness and fatigue
  - mild nausea 1 or 2 times per week which did not interfere with her ability to eat or drink ( not requiring Omeprazole or Ondansteron)
  - no appetite for the first 3 months of treatment
  - low magnesium but remained the normal range (no supplemental magnesium). Calcium and potassium remained stable
  - one reported instance of her “sitting in a chair” and, “falling.”
    - normal blood pressure supine and standing, a regular pulse, unchanged electrolytes.
  - ⇒close monitoring
  - ⇒There were no reported recurrences
- Discharged home after 3 months on Bdq due to family social concerns.

# Patient TJ

- After discharge
  - Mild complaints: several days of vague, L sided chest ache and 1 week of intermittent nausea
  - ⇒ resolved spontaneously without further evaluation or treatment
- January 2016
  - complained of noises and / or pain in her ears
    - Except TJ, all other 4 patient had both clinical and audiographic evidence of hearing loss leading to change and / or discontinuation of their injectable aminoglycoside.
- February 2016
  - apparently cut herself with a knife
  - Concerns were raised regarding depression
  - ⇒ Cs and Pto were suspended while a psychiatric evaluation was performed
  - ⇒ no mental status changes and medications re-started
- QTc: no problems
  - reached maximum 387 (Minimum 355, Mean 370)
  - less variability than other members of the cohort (only member of the cohort whose QTc did not go above 400 or increase by more than 50 between 2 consecutive measurements)
- 60 days of Bdq treatment
  - smear and culture negative
- Remains smear and culture negative to date