



Auer, C, Baliwagan, MBR, Belen, VA, Gler, MT, Macalintal, LE, Maramba, EK, Lumagod, A, Raymond, LO, Lofranco, VS, Orillaza-Chi, RB, Quelapio, MID, Tupasi, TE, “Irregularity of MDR-TB treatment: frequency and main causes in the three treatment centers of Manila, Philippines.” *The International Journal of Tuberculosis and Lung Disease*, Vol. 11, Number 11, Nov. 2007, Supplement 1. S246.

Background: To enhance cure and avoid amplification of resistance, adherence to MDRTB treatment under direct observation is important. However, MDRTB treatment is unpleasant and many aspects of life combat with the need to go for treatment daily.

Objective: To describe the frequency and causes of treatment interruptions among MDRTB patients of 3 treatment centers in Manila: 1) MMC: Makati Medical Center, an out-patient clinic; 2) KASAKA: a clinic in a private TB hospital with 15 to 20 in-house patients and out-patients; and 3) LCP: Lung Center of the Philippines, a clinic in a large governmental hospital with 8 in-house patients and out-patients.

Methods: This is a review of clinic attendance sheets over a six-month period in these 3 MDRTB centers. For each month, the proportion of patients with no absences, 1-2 absences, 3-4 absences, 5-7 absences, 8-13 absences and >13 absences per month was calculated. Reasons for absences were recorded.

Results: On average, only 51% of the patients had no treatment interruption in a month. 26% of the patients had more than 4 absences per month. The most commonly stated reason for treatment interruption was illness (e.g, the flu, headache, symptoms related to TB), followed by ‘going home to province’, side effects of the drugs, typhoon or floods, and being busy with work/job.