



Orillaza-Chi, RB, Concepcion, AAL, Quelapio, MI, Macalintal, LE, Gler, MT, Raymond, LO, Maramba, EK, Tupasi, TE, “Internal consilium for programmatic MDR-TB management: Makati, Philippines,” The International Journal of Tuberculosis and Lung Disease, Vol. 11, Number 11, Nov. 2007, Supplement 1. S263.

Background: An internal consilium (IC) composed of clinicians and program coordinators of the Makati Medical Center (MMC) MDR-TB Management Program was formed in September 2005 to standardize the approach in managing drug-resistant TB (DRTB).

Objective: To describe the processes in the discussions on case management carried out in IC meetings.

Materials and Method: A review of IC records and forms obtained from January to December 2006.

Results: Cases presented in the IC included those who were suspected and diagnosed to have DRTB. The IC met 44 times, spending 1-4 hrs per meeting. A total of 843 cases for 430 patients from the MMC Treatment Center and those from the two satellite treatment centers were presented. An average of 19 cases (range 5-88) was discussed per meeting. Majority of discussions focused on case management in 511 (60.6%), drug regimen design in 234 (27.8%) and treatment outcome in 97 (11.5%). Decisions were arrived at by consensus. Reasons for changes in regimen varied from a) shift to continuation phase in 90 (17.6%), b) adverse reactions in 302 (59.1%) and c) unavailability of drugs in 119 (23.2%). A patient could be presented several times (range: 1-9) for further clinical and programmatic management.

Conclusion: The IC is an effective venue for case management ensuring adherence to the guidelines set by the World Health Organization for drug-resistant cases. With the increasing number of cases being discussed, it will be necessary that IC be replicated in all the satellite treatment centers.