

Fluoroquinolones halt multidrug-resistant-TB in contacts

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For contacts of individuals with multidrug-resistant tuberculosis, fluoroquinolone therapy is associated with health system savings and reduced mortality, according to a study published in the July 15 issue of the *American Journal of Respiratory and Critical Care Medicine*.

(HealthDay)—For contacts of individuals with multidrug-resistant tuberculosis (MDR-TB), fluoroquinolone (FQN) therapy is associated with health system savings and reduced mortality, according to a study published in the July 15 issue of the *American Journal of Respiratory and Critical Care Medicine*.

Gregory J. Fox, M.D., Ph.D., from the Montreal Chest Unit in McGill University, and colleagues examined the potential benefits, risks, and cost-effectiveness of FQN therapy to prevent TB in contacts of individuals with MDR-TB. Decision analysis was used to compare costs

and outcomes associated with no treatment versus a six-month daily FQN course in contacts of those with MDR-TB.

The researchers found that there were health system savings, lower incidence of MDR-TB, and lower mortality for FQN preventive therapy versus no treatment. With FQN therapy of infected contacts, the incidence of MDR-TB with acquired FQN resistance would also be lower.

"In our model, FQN preventive therapy resulted in substantial health system savings and in reduced [mortality](#), incidence of MDR-TB, and incidence of acquired FQN-resistant disease as well as improved quality of life," the authors write. "FQN therapy remained cost saving with improved outcomes even if the effectiveness of therapy in preventing MDR-TB was as low as 10 percent."

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