



## The Medical **Bulletin**

### In Pulmonology

#### Updated WHO definitions for MDR, XDR tuberculosis.: January 2021

**New case of tuberculosis:** a newly registered episode of TB in a patient who has never been treated for TB or has taken anti-TB medicines for less than 1 month.

**MDR-TB:** TB caused by Mycobacterium Tuberculosis (M. tuberculosis) strains that are resistant to at least both rifampicin and isoniazid.

**Pre-XDR-TB:** is TB caused by Mycobacterium tuberculosis (M. tuberculosis) strains that fulfil the definition of multidrug resistant and rifampicin-resistant TB (MDR/RR-TB) and which are also resistant to any fluoroquinolone.

**XDR-TB:** is TB that is resistant to INH, Rifampicin, any *fluoroquinolone* and to at least one of three second-line injectable drugs (capreomycin, kanamycin and amikacin).

**Rifampicin-resistant TB (RR-TB):** TB caused by M. tuberculosis strains resistant to rifampicin. These strains may be susceptible or resistant to isoniazid (i.e., MDR-TB), or resistant to other first-line or second-line TB medicines.

**Rifampicin-susceptible, isoniazid-resistant TB (Hr-TB):** caused by M. tuberculosis strains resistant to isoniazid and susceptible to rifampicin.

**First line TB medicines:-** used to treat drug-susceptible TB – *ethambutol, isoniazid and pyrazinamide* – may also be used in MDR-TB regimens.

**Second-line TB medicine (or drug):** an agent used for the treatment of drug-resistant TB. Streptomycin is now considered a second-line TB medicine and is used only as a substitute for amikacin in the following situations: when amikacin is not available, when there is confirmed resistance to amikacin but confirmed susceptibility to streptomycin, and when an all-oral regimen cannot be constituted.

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