

EDITORIAL

TUBERCULOSIS

Tuberculosis control remains a global problem. Tuberculosis occurs all over the world affecting millions.

Its' presentation depends on the affected part of the body.

About one quarter of the world's population has latent TB These are people infected by TB but are not ill with the disease and cannot transmit the disease.

These people have 5-15% life time risk of falling ill with TB. People with immuno-suppression have 20 to 30 times more livelihood of developing active TB.

Anti TB medicines have been used for decades and strains that are resistant to one or more of the drugs used for treatment have been documented in every country. Multi Dose Resistant Tuberculosis (MDR-TR) is a form of TB caused by bacteria resistant to Isoniazid and Rifampicin the two most important first line Anti TB drugs.

MDR is treatable by 2^{nd} line medicine, 2^{nd} line treatment may require expensive medication for a duration as long as upto two years.

Sometimes extensive drug resistant (XDR-TB) occurs and this is more serious since response to treatment may be absent.

MDR-TB and XDR-TB are likely to negatively impact on treatment of TB. As a result, newer drugs and strategies are required in treatmen and control of TB.



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