

DOES ANTIRETROVIRAL TREATMENT REDUCE CASE-FATALITY AMONG HIV-POSITIVE PATIENTS WITH TUBERCULOSIS IN MALAWI?

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SETTING: Thyolo district, Malawi.

OBJECTIVES: To report on a) case-fatality among HIV-positive Tuberculosis(TB) patients while on anti-TB treatment and b) whether antiretroviral treatment (ART) initiated during the continuation phase of TB treatment reduces the case-fatality

DESIGN: Retrospective cohort analysis.

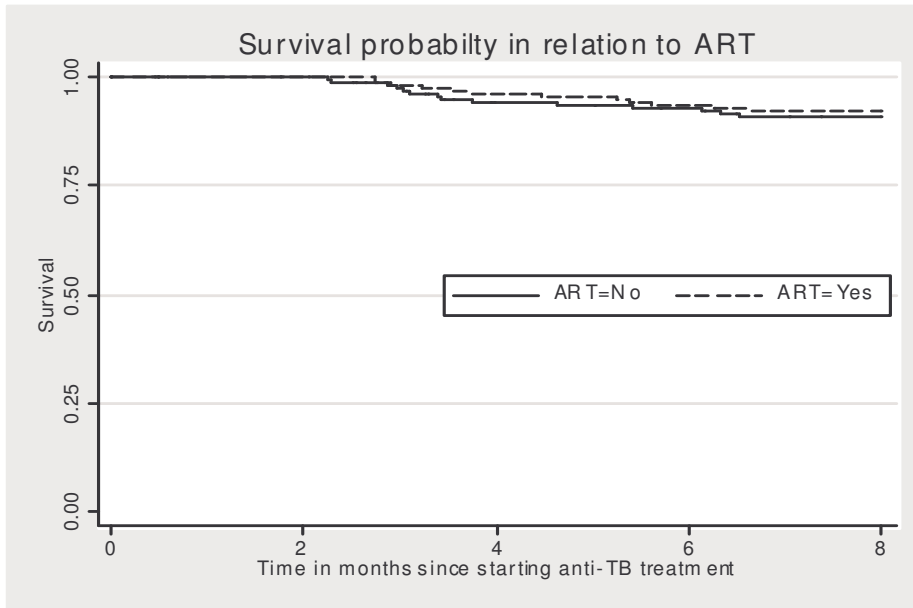
METHODS: Comparative analysis of treatment outcomes for TB patients registered between January and December 2004..

RESULTS: There were 983 newly registered TB patients, of whom 658(67%) were HIV-positive. A total of 132(20%) patients died during the 8 month course of anti-TB treatment of whom 82(62%) died within the first 2 months of treatment (initial phase) when ART was not provided (cumulative incidence=3.0, 95%CI: 2.5-3.6 per 100 person-years). There were 576 TB patients who completed the initial two months of anti-TB treatment of whom 180(31%) chose to start ART. The case fatality rate per 100 person-years among those accepting ART (1.0, 95% CI:0.6-1.7) was not significantly different to patients not accepting ART (1.2, 95% CI:0.9-1.7, Adjusted Hazard Ratio:0.86, 95%CI:0.4-1.6, P=0.6)

CONCLUSIONS: ART provided in the continuation phase of TB treatment does not have a significant impact on reducing case fatality. Additional measures to address high early mortality in HIV-positive TB patients are urgently needed.

KEY WORDS: MALAWI, HIV/AIDS, TB, ART, CASE-FATALITY

FIGURE. Survival probability in relation to antiretroviral treatment (ART) during the continuation phase (months 2-8) of anti-tuberculosis treatment, Thyolo, Malawi.



Log-rank test $X^2 = 0.34$, $P=0.6$