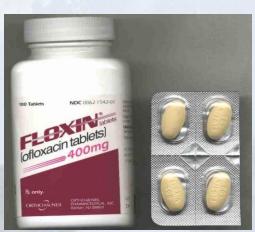




FLUOROQUINOLONE SALE AND IT'S THREAT







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Outline

- Background information
- 1st study conducted
- 2nd study conducted
- General conclusion
- Recommendation
- Acknowledgement

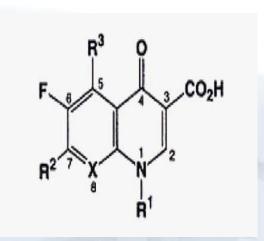




Background information

- Ciprofloxacin
- Moxifloxacin
- Ofloxacin
- Levofloxacin
- Gatifloxacin
- Spafloxacin





- Fluoroquinolones may shorten TB treatment and are in 2nd line TB drugs
- However they are used in the treatment of other infections
- RTI, UTI, soft tissue infection





Why fluoroquinolone

Action

- Bactericidal, cause rapid cell death
- Inhibit DNA replication

Safety

- Well tolerated, favorable PK.
- Available both orally and parenterally

Literatures

- 19 patients treated for 9 months (5/19) became culture negative, no side effect (Grosset et al 1985)
- Good AUC/MIC esp Mox. (Schentag et al 2001)
- Concern about emergence of resistance





1st study conducted

Title:

Sale of fluoroquinolone

Objective:

Evaluate the total sell of fluoroquinolone in Kilimanjaro

Method:

We conducted a survey









1st study cont.

Analysis:

- Anatomic Therapeutic Chemical (ATC) J01 formula was used.
- Total sale were evaluated using Defined Daily Doses (DDD) per 1000 inhabitants (DID).

Results:

• Fluoroquinolones accounted for 12% of the total antibiotic sales. J Antimicrob Chemother 2010;65:145–147



2nd study conducted

Title:

Resistance to fluoroquinolone

Objective:

To determine the rate of fluoroquinolone resistance

Method:

 A total of 291 M. tuberculosis isolates were obtained between April 2009 and June 2010 from patients with smear-positive pulmonary TB and tested for susceptibility to ciprofloxacin, moxifloxacin





2nd study cont

Analysis:

 Drug susceptibility testing was performed. If growth was detected in a fluoroquinolone tube the isolate was labelled resistant

Results:

• Only two (0.7%) of the 291 *m. tuberculosis* isolates were resistant to ciprofloxacin.

JAC 2011 Aug;66(8):1810-4





Conclusions

- There is substantial sale of the fluoroquinolones by authorized pharmacies.
- Therefore is a threat as fluoroquinolones are included in the 2nd line of TB treatment

 Our findings indicate that the rate of fluoroquinolone resistant *M. tuberculosis* in Tanzanian patients with TB is low (0.7%)





Recommendations

 Control of antibacterial use in Tanzania requires adequate restriction of antibacterial sale by authorized pharmacies only.

 Future application of fluoroquinolones in TB treatment regimens is promising.



Limitations

 Exclusion of part two pharmacy in the survey of fluoroquinolone sale

Exclusion of other fluoroquinolone from analysis



Acknowledgements



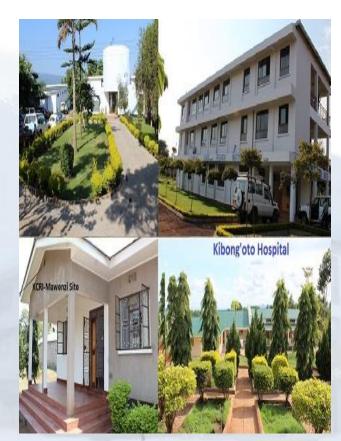
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Research sites and lab



THANKS FOR LISTENING END