

Appendix D

Recommended Treatment for Infectious Tuberculosis

Indications for Starting Treatment

Infectious Pulmonary Tuberculosis - All applicants with abnormal chest radiographs and one or more sputum smears positive for acid-fast bacilli must be started on a CDC/American Thoracic Society (ATS) recommended antituberculosis regimen. These individuals may not travel until their sputum smears are negative on three consecutive days. At that point they may be classified as "Class A, non-infectious for travel purposes", but must be provided with medication for use through the period of travel and until they can be evaluated in the U.S.

Possible Tuberculosis - Individuals with abnormal chest radiographs compatible with pulmonary tuberculosis should be evaluated and treatment started if applicant appears ill and the examining physician thinks that treatment is indicated, even if sputum smears for acid-fast bacilli are negative.

Extrapulmonary Tuberculosis - If military or other non-pulmonary disease is suspected, treatment should be initiated.

Treatment - for adults, when drug resistance is not suspected

Treat for 6 months:

First 2 months of treatment:

isoniazid 300 mg	All drugs given
rifampin 600 mg*	orally, once daily
ethambutol 25 mg/kg**	
pyrazinamide 20-30 mg/kg	

Months 3-6 of treatment:

isoniazid 300 mg	All drugs given
rifampin 600 mg*	orally, once daily
ethambutol 15 mg/kg***	

or

isoniazid 15 mg/kg	All drugs given
rifampin 600 mg*	at same time,
ethambutol 50 mg/kg***	twice weekly

*Rifampin dose should be 450 mg per day for patients weighing less than 50 kg.

**Streptomycin at a dose of 1 gram intramuscularly per day (or 750 mg for persons weighing less than 50 kg or who are more than 50 years of age) may replace ethambutol in the above regimen, but is given for the first 2 months only, after which isoniazid and rifampin are continued for 4 months.

***If drug susceptibility tests are available, and organism is susceptible to all anti-TB drugs, then ethambutol can be discontinued after the first 2 months of treatment.

Treatment - for adults with isoniazid-resistant organisms**

Treat for 9 months:

First 2 months of treatment:

rifampin 600 mg*	All drugs given
ethambutol 25 mg/kg	orally, once daily
pyrazinamide 20-30 mg/kg	

Months 3-9 of treatment:

rifampin 600 mg*	Both drugs given
ethambutol 50 mg/kg	at same time, twice
	per week

or

rifampin 600 mg*	Both drugs given
ethambutol 15 mg/kg	once daily

or

Treat for 12 months:

First 2 months of treatment:

rifampin 600 mg*	Both drugs given
ethambutol 25 mg/kg	orally, once daily

Months 3-12 of treatment:

rifampin 600 mg*	Both drugs given
ethambutol 50 mg/kg	at same time, twice
	per week

or

rifampin 600 mg*	Both drugs given
ethambutol 15 mg/kg	once daily

*Rifampin dose should be 450 mg per day for patients weighing less than 50 kg.

**If the organism is resistant to multiple drugs, consult references or contact CDC for assistance.