

## Hope for MDR-TB cure on the anvil, but further research required

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After close to five decades of no new drugs being discovered for TB, two new drugs - bedaquiline and delamanid - have recently been or are about to be approved. Research is urgently needed to determine the best way to use these new drugs so that treatment can be made shorter and more effective, and rolled out to treat the growing number of people with MDR-TB. Medical humanitarian organisation Médecins Sans Frontières (MSF) has warned that if measures to tackle multidrug-resistant tuberculosis (MDR-TB) are not significantly stepped up, including addressing barriers that prevent both research into better drug combinations and treatment scale up, MDR-TB rates will continue to increase worldwide and a historic opportunity to improve abysmal cure rates will have been squandered.

The World TB day will be observed on this Sunday, March 24th, 2013. India, Russia and China account for nearly 60% of the global MDR-TB case burden. Yet in 2011, less than one in five of an estimated 630,000 people with MDR-TB had been able to get the treatment they needed. With two new drugs available, high burden countries like India must scale up efforts to diagnose and treat MDR-TB now, so that robust programmes are in place once the new drugs are introduced.

MSF has called out to people on MDR-TB treatment and their caregivers from around the world outline these and other demands in the Test me, treat me manifesto, and urge others to join their call for urgent action. The 'Test me, treat me' manifesto can be read [here](#) and see who signed it [here](#)

"We have been waiting for half a century for new drugs that are effective against tuberculosis", said Joanna Lodomirska, Medical co-ordinator for MSF in India. "Having two new drugs on the point of being approved is a major opportunity to improve treatment for MDR-TB, and we can't afford to waste it. India must play a major role in researching how to use the new drugs in regimens that are much shorter, less toxic, and more effective."

MSF projects in India are seeing increasing numbers of people with MDR-TB, with drug resistance found not only among patients who have previously failed TB treatment but also in patients newly diagnosed with TB, a clear sign that MDR-TB is

being transmitted in its own right.

Left untreated, the infectious disease is lethal. Even with appropriate diagnosis treatment today puts people through two years of excruciating side effects, including psychosis, deafness, numbness and constant nausea, with painful daily injections for up to eight months. Barely half of people get cured.

India does not yet have enough prequalified laboratories to conduct the drug-sensitivity testing needed to scale up diagnosis of MDR-TB. Diagnosis in the private and public sector is often incomplete, leading to inappropriate treatment and spreading resistance. Scaling up the numbers of accredited labs for first and second-line drug-sensitivity testing is urgently needed to provide people with the appropriate TB treatment the first time, and to avoid amplification of resistance in India.