

**TB CHIEF DIRECTORATE**

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**TO: ALL TB COORDINATORS, MEDICAL OFFICERS, PARTNERS**

**FROM: DR D MOLOI  
CD TB PROGRAM**

**DATE: 24<sup>TH</sup> JULY 2012**

**SUBJECT: 1. TERMINATION OF THE USE OF STREPTOMYCIN FOR  
RE-TREATMENT CASES.**

**2. AMENDMENT TO ARV GUIDELINES FOR CO-INFECTED  
PATIENTS**

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With the increasing availability of rapid tests for drug resistance such as the LPA or GeneXpert the use of Regimen 2 TB treatment for retreatment cases is becoming obsolete. Research has shown that it has no value anymore. The following should therefore be applied henceforth:

- All retreatment cases should therefore have a rapid test for drug resistance(GeneXpert or LPA where there is no Gene-expert) requested with their first sputum,
- All previously treated patients diagnosed with sensitive TB must be started on Regimen 1, instead of Regimen 2.
- Those confirmed as Rifampicin resistant must be started on MDR-TB treatment and also continue to establish if MDR-TB through DST and LPA.

By end of financial year all facilities will be provided with Gene-expert technology.

## **2. ARV GUIDELINES FOR CO-INFECTED PATIENTS**

All HIV/TB co infected patients are now eligible for ART regardless of their CD4 count. ART and CTX prophylaxis can be started as soon as the patient is stable on their TB treatment (usually after 2 weeks)

For any queries please contact Ms Mntambo at 011 355 3276 or Dr Mqhayi at 011 355 3275.

Kind regards



**DR D MOLOI**

**CD TB PROGRAMME**

**DATE:** 24/7/2012