

Impact of Bedaquiline, Pretomanid, Linezolid and Moxifloxacin (BPaLM) Regimen on Treatment Outcome and Patient Adherence Rate Among Multi-Drug Resistant (MDR) And Pre-Extensively Drug Resistant (PRE-XDR) Pulmonary Tuberculosis Patients, Registered at a Nodal Drug Resistant Tuberculosis (DRTB) Centre

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I. BACKGROUND

The BPaLM regimen is a short-course, all-oral treatment regimen developed for MDR/PRE-XDR pulmonary tuberculosis. It offers a 29/36 weeks treatment duration, providing a better alternative to conventional longer MDR-TB regimens.

II. AIM

Assess the impact of BPaLM regimen on treatment outcome and patient adherence rate among MDR & PRE-XDR pulmonary tuberculosis patients, registered at a nodal drug resistant tuberculosis centre.

III. METHODS

This prospective observational study included 81 MDR/RR-TB and PRE-XDR pulmonary TB patients receiving the BPaLM regimen. Patients were followed monthly and treatment success, adherence & other outcomes were analysed using appropriate statistical methods, with $p < 0.05$ considered statistically significant.

IV. RESULT

Among 81 patients, 70 (86.4%) were adherent and 11 (13.6%) were non-adherent. Treatment success,

comprising 48 (59.3%) treatment-completed and 17 (21.0%) cured patients, was achieved in 65 (80.2%). Regimen change occurred in 6 (7.4%), death in 5 (6.2%), loss to follow-up in 3 (3.7%), and treatment failure in 2 (2.5%).

V. CONCLUSION

A statistically significant association was observed between treatment adherence and treatment outcome. Treatment adherence was significantly associated with treatment success, (Fisher's exact test, $p < 0.001$).