

Overview of WHO consolidated guidelines on TB treatment and care 2025

New DR-TB regimens: evidence and rationale

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Joint regional workshops on new WHO policies for TB care
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Evolution in treatment of TB disease

DS-TB

6-month
2HRZE/4HR

- Switch to all-oral regimens
- Introduction of repurposed medicines: quinolones, linezolid, clofazimine
- Discovery and policy on use of new medicines in regimens: bedaquiline, delamanid, pretomanid
- Shorter treatment duration
- Increase in efficacy

4-month
2HPMZ/2HPM

1970 ... 1996 ... 2018 2019 2020 2021 2022 2023 2024 ...

DR-TB

18-24-month
regimens

9-11-month
regimens

All-oral
regimens

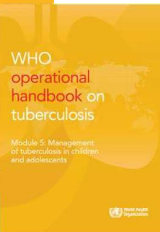
6-month
regimens

TB disease treatment in 2022-25: Guidelines & Handbooks

DS-TB

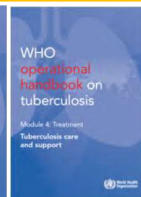
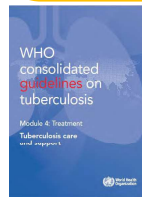
Guidelines & handbook 2022

- **6-month 2HRZE/4HR**
- **4-month 2HPMZ/2HPM**
- **4-month 2HRZ(E)/2HR regimen** for children and adolescents



TB
Care &
Support

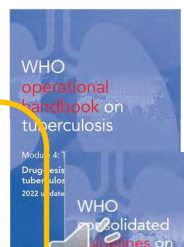
Guidelines & Handbook 2022



DR-TB

Guidelines and handbook 2022-25 update

- **6-month BPaLM regimen**, in patients (aged ≥ 14 years) with MDR/RR-TB
- **6-month BDLLfxC regimen**, in all patients including children
- **9-month, all-oral, bedaquiline-containing regimens**
- **Longer regimens** for patients with extensive forms of DR-TB



Consolidation of the guidelines (and handbooks) in 2025



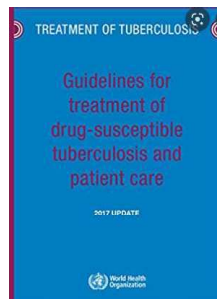
Chapter 1. Treatment of drug- susceptible TB (DS-TB)



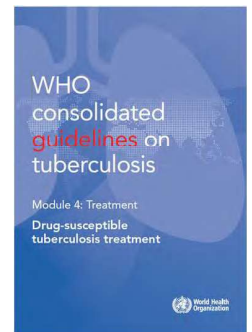
2022 **DS-TB** Guidelines update



Fourth edition 2010



2017



2022

- All DS-TB treatment recommendations were consolidated
- Redundant recommendations were removed
- Nine recommendations remain valid
- Two new recommendations were added
 - **Treatment of drug-susceptible TB using 4-month regimens**



2022 **DS-TB** Guidelines update

Summary of Recommendations

New patients with pulmonary TB should receive a regimen containing 6 months of rifampicin: 2HRZE/4HR

Wherever feasible, the optimal dosing frequency for new patients with pulmonary TB is daily throughout the course of therapy

In new PTB patients treated with the regimen containing rifampicin throughout treatment, if a positive sputum smear is found at completion of the intensive phase, the extension of the intensive phase is not recommended

The use of fix-dose combination (FDC) is recommended over separate drug formulations in treatment of patients with DS-TB

In all patients with DS PTB, the use of 3x dosing is not recommended in both the intensive and continuation phases of therapy, and daily dosing remains the recommended dosing frequency

People aged 12 years or older with drug-susceptible pulmonary TB, may receive a 4-month regimen 2HPMZ/2HPM

In children and adolescents, 3month-16years, with non-severe TB, a 4-month treatment regimen 2HRZ(E)/2HR should be used

It is recommended that TB patients who are living with HIV should receive at least the same duration of daily TB treatment as HIV-negative TB patients.

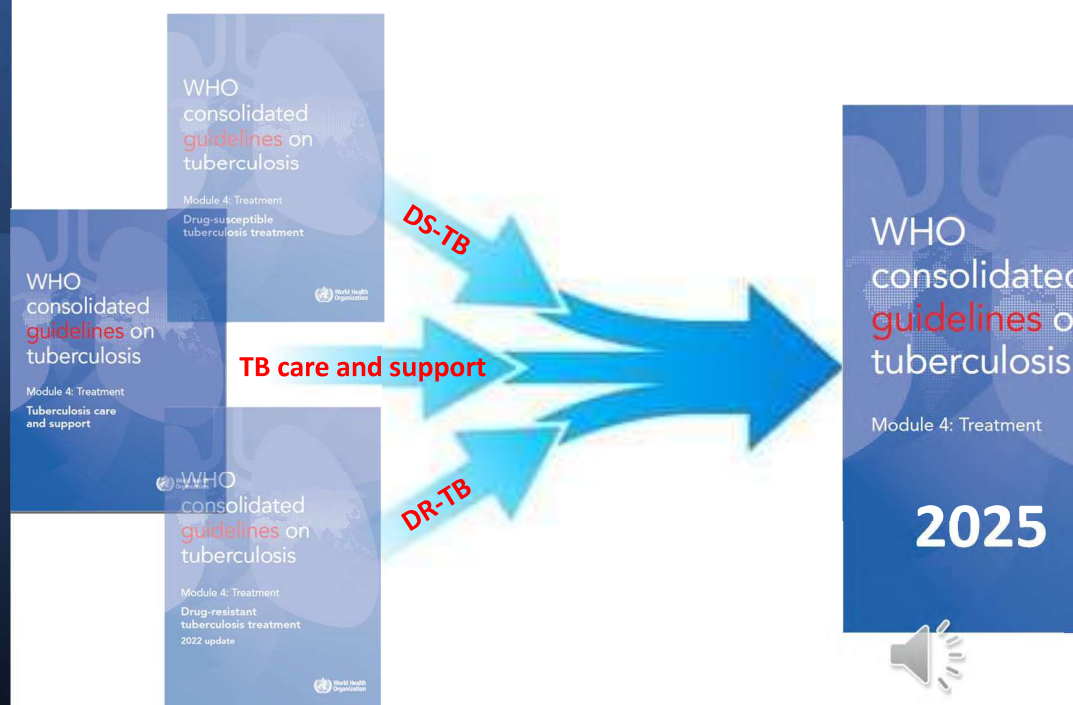
ART should be started as soon as possible within two weeks of initiating TB treatment, regardless of CD4 cell count, among people living with HIV.

In patients with TB meningitis, an initial adjuvant corticosteroids with dexamethasone or prednisolone tapered over 6-8 wk should be used

In patients with TB pericarditis, an initial adjuvant corticosteroids may be used



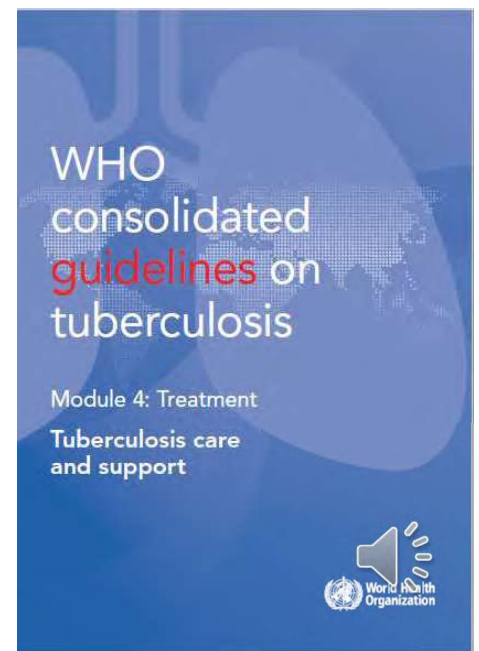
Chapter 3: Tuberculosis care and support



2022 Guidelines - TB care and support

Recommendations on:

1. Care and support interventions for all people with TB
2. Models of care for people with DR-TB
3. Models of care for children and adolescents



Chapter 2: Treatment of drug- resistant TB (DR-TB)



2025 Guidelines DR-TB chapter

- ❖ **Treatment of drug-resistant TB using 6-month regimens.**
 - **Recommendation 1.1** The 6-month bedaquiline, pretomanid, linezolid, and moxifloxacin (BPaLM) regimen
 - **Recommendation 1.2** The 6-month bedaquiline, delamanid, linezolid, levofloxacin and clofazimine (BDLLfxC) regimen (NEW)
- ❖ **Treatment of drug-resistant TB using 9-month regimens**
 - The 9-month all-oral regimen for MDR/RR-TB
 - The modified 9-month all-oral regimens for MDR/RR-TB (NEW)
- ❖ **Treatment of drug-resistant TB using longer regimens**
- ❖ **Regimen for rifampicin-susceptible and isoniazid-resistant tuberculosis**
- ❖ **Monitoring patient response to MDR/RR-TB treatment**
- ❖ **Start of antiretroviral therapy in patients on MDR/RR-TB regimens**
- ❖ **Surgery for patients on MDR/RR-TB treatment**
- ❖ **Hepatitis C virus (HCV) and MDR/RR-TB treatment co-administration (NEW)**

