

Title	Procedure – Registration of the medication - Active TB - Phases 1 and 2
TB toolbox CODE	DSPu-TB_TB-ACT_Procedure-ENREG-MED-PHASE-1-2_EN
Revised on	2023-10-01

Tuberculosis is a disease that must be treated (i.e., treatment is obligatory). Fully taking the treatment is mandatory under the *Public Health Act*, for it not only favours healing, but it also eliminates the risk of contagiousness and antibiotic resistance.

GOAL:

- Document the taking of the TB medication prescribed by the physician.

OBJECTIVES:

- Ensure regular and optimal follow-up of people with active TB who are undergoing treatment.
- Quickly identify instances of non-compliance with the treatment plan and offer relevant support.
- Make sure the treatment plan is adhered to.

NURSES’ RESPONSIBILITIES:

- Ensure the appropriate taking of TB medication by the patient who is undergoing DOT (directly observed therapy), and this for the entire duration of the treatment.
- Check the dosage of the TB medication, based on the treatment phase. • See the section entitled **DETAILS OF THE TB TREATMENT** below.
- Record the doses taken under direct observation (DOT) and the self-administered doses (SA) to enable a proper count.
- Record the doses not taken under direct observation (DOT) and those reported by the patient as not having been self-administered (SA).
- If necessary, reach out to Public Health authorities to discuss strategies to promote diligence and compliance.
- Notify the treating physician and the infectious diseases advisor from the Public Health authorities if a client is late or is facing obstacles with regard to his treatment plan.
- In the file, note the specifics of the interventions undertaken with regard to problematic situations and the means used to mitigate the risk of failure of the TB treatment (note - this is mostly to be prepared in the event of legal action).

DETAILS OF THE TB TREATMENT:

Initial phase (Phase 1)

- During this phase, which lasts 2 months, the medication must be taken daily under direct observation (DOT) 5 days/week and self-administered (SA) on both weekend days.
- A **total of 60 doses** (DOT and SA) over a period of 60 days if at all possible must mandatorily be taken before moving on to Phase 2.
- The treatment will be extended by the number of days required in the event of missed doses.

Continuation phase (Phase 2)

Standard DOT can last 4, 7 or 10 months, during which time the medication must be taken 3 times a week, on Monday, Wednesday and Friday. Here are the number of doses to take, depending on the duration of this phase:

- 4 months: 51 doses
- 7 months: 90 doses
- 10 months: 128 doses

An alternative DOT can be recommended by the expert in some circumstances (example: DOT die).

The duration of the continuation phase (Phase 2) is determined by the physician based on the patient’s medical history, bacteriological status and clinical development.

Note: The continuation phase (Phase 2) could be stopped after 2 months (26 doses) but solely in the case of adults with BK cultures that are negative and where x-rays revealed no change after 4 months of treatment.