ABSTRACT

DRUG RELATED PROBLEMS OF ANTITUBERCULOSIS AGENTS IN PATIENTS WITH TB-MDR (MULTI-DRUG RESISTANT)

(Study at Inpatient and Outpatient Units of Jember Chest Hospital)

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Multi-drug resistant (TB-MDR) is a resistance to isoniazid and rifampicin drugs. Various drugs (polypharmacy) and long duration of therapy can cause drug related problems (DRPs).

This study aims to analyze the profile of actual antituberculosis drug problems in patients TB-MDR. DRPs were identified by using classification of PCNE v08.02 2017 and conducted by interprofessional communication between physician and pharmacist. This study has been reviewed by the Health Research Ethic Committee in Chest Hospital Jember and has been issued "Ethical Clearence". The type of study is observational method and used retrospective data on adult patients diagnosed with TB-MDR with or without complications and/or comorbidities period at January 2016-December 2018 in inpatient and outpatient units in Jember Chest Hospital (N = 102).

The results showed that there were 159 DRPs identified in 30 patients (29%) based on visiting patients. Type of drug related problem in patients with TB-MDR were safety of the therapy (98%) and refuse to the treatment (2%). Drug side effects in patients with TB-MDR include hyperuricemia (42%), hypokalemia (26%), ear function disorders (11%), arthralgia (10%), kidney disorders (6%), psychotic disorders (2%), sleep disorders (2%), nausea vomiting (1%). The cause of DRPs were pyrazinamide (41%), kanamycin (36%), levofloxacin (11%), capreomycin (6%), cycloserine (3%), etionamide (1%), patients (2%).

From all patients, 55% DRPs were solved involve altogether solved or partly solved. Good collaboration and communication among health professionals were needed to increase the success rate of TB-MDR treatments, especially withan occurrence of DRPs.

Keywords: *resistance, drug related problem, side effect of drug*