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UCT research shows ART and preventive TB drug combine to reduce TB

The ART plus IPT TB prevention study: Announcement of preliminary results to be released for the first time at the XIX International AIDS Conference in Washington DC, 26 July 2012 at 17h00 EST

Under field conditions, 12 months of isoniazid preventive therapy (IPT) safely prevented tuberculosis among HIV infected adults who were also taking antiretroviral therapy (ART), according to the findings of a study conducted at a busy HIV clinic in South Africa. For patients on ART, there were 37% fewer cases of TB among those who also received IPT, compared with those who were on ART alone.

The ART plus IPT study was carried out at Ubuntu clinic in Khayelitsha, one of Cape Town's largest townships. The Ubuntu clinic is a groundbreaking HIV/TB clinic which has been providing ART since 2001 with the assistance of Medecins Sans Frontieres (MSF).

A team of researchers from the University of Cape Town conducted this study under Professor Gary Maartens, the principal investigator of the study. "Although antiretroviral therapy significantly reduces the risk of tuberculosis among HIV infected people, the risk of TB still far exceeds that in HIV-uninfected people. Additional strategies like IPT needed to be explored," said Professor Maartens.

The study had multiple funders, including the South African Department of Health, MSF, Wellcome Trust and the European and Developing Countries Clinical Trials. It was conducted in a routine clinic setting, thus showing that provision of ART with IPT would be possible in most areas with high levels of HIV and TB. "Implementing IPT will be relatively easier in ART clinics where systems already exist to retain patients in care and where adherence is carefully monitored," said Dr Molebogeng Rangaka, the lead investigator of the study. "However, HIV/TB programmes should resist the temptation of solely focusing on ART clinics. Pre-ART clinics should equally be strengthened to provide IPT", she said.

Findings of the study

- Twelve months of IPT significantly reduced the risk of developing tuberculosis among patients who were also taking ART
- IPT was well tolerated by most who took it
- Provision of ART with IPT would be possible in most areas with high levels of HIV and TB.

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