

CLINICAL CAPSULES

TB Drug Monitoring

Therapeutic drug monitoring may be of benefit in patients with multidrug-resistant tuberculosis, but it is often underutilized or used inappropriately, according to Jiehui Li, M.B., of the Bureau of Tuberculosis Control, New York, and associates.

In a study of patients in 10 different clinics in which therapeutic drug monitoring is recommended for all patients with multidrug-resistant TB, only 45% of 109 eligible patients received such monitoring; the investigators found (Chest 2004;126:1770-6).

The timing of therapeutic drug-monitoring collections was problematic; 86% of initial collections were timed properly, but subsequent collections were highly variable with only 63%-88% timed properly.

Inappropriate timing of collections can adversely affect a clinician's ability to accurately interpret test results, the investigators said.

Therapeutic drug monitoring in patients with TB should be used if there is clinical suspicion of toxicity from high doses, or of treatment failure from low doses, and when results would be used to

guide dosing to achieve recommended concentrations. Therapeutic drug monitoring collections should be taken 2 hours after treatment for most medications, and all results, interpretations of results, and actions taken should be clearly documented, they concluded.

Once-a-Day HIV Pill

A once-daily all-in-one pill for the treatment of HIV may soon be a reality.

Bristol-Myers Squibb Co. and Gilead Sciences Inc. announced a joint venture to test and market such a pill, which combines three common highly active antiretroviral medications from two classes of

AIDS drugs, including Bristol-Myers Squibb's drug Sustiva (efavirenz), and Gilead's drug Truvada, which combines Emtriva (emtricitabine) and Viread (tenofovir disoproxil fumarate).

The three-drug combination is one of the preferred nonnucleoside reverse transcriptase inhibitor-based treatments for use in treatment-naïve HIV patients, according to guidelines issued by the U.S. Department of Health and Human Services.

Work on the new combination pill has been ongoing for nearly a year, and will continue in 2005, the companies said in a statement.

AEP in Soldiers

Acute eosinophilic pneumonia (AEP) is considered a rare disease, but it occurred at an increased rate among a population of soldiers serving in or near Iraq between March 2003 and March 2004, and may be associated with new-onset smoking and/or dust inhalation, an epidemiologic study shows.

Of 183,000 military personnel deployed in or near Iraq during the study period, 18 developed AEP, for an incidence of 9.1/100,000 patient-years. Two patients died and the remaining soldiers responded to treatment. No known causes of pulmonary eosinophilia, common sources of exposure, clustering, or person-to-person transmissions were identified, reported Andrew F. Shorr, M.D., of Walter Reed Army Medical Center, Washington, and his colleagues (JAMA 2004;292:2997-3005).

All the patients were smokers, and 78% had recently started smoking. Compared with 48 controls, new-onset smokers had a significantly increased risk of AEP (odds ratio 122). Prior studies have also suggested a link between new-onset smoking and AEP. All but one patient reported significant exposure to fine airborne sand or dust.

AEP should be considered, and bronchoscopy performed, in military personnel with unexplained respiratory failure, the investigators concluded. Most patients survive when treated promptly with corticosteroids, they said.

RSV Season Underway

Recent data indicate the onset of the respiratory syncytial virus season, according to a Centers for Disease Control and Prevention report.

RSV is a cause of severe disease among older adults and those with compromised health, as well as a major cause of respiratory infections in children. The virus can exacerbate cardiac and pulmonary conditions.

Preliminary data from July 3 to Dec. 4, based on reports from 84 laboratories in 42 states, suggested that the annual outbreak of the virus had gotten underway in two U.S. regions—the South and the Northeast. Fifty of the laboratories had reported RSV detections since Nov. 6 (MMWR 2004;53:1159-60).

In 2003-2004, widespread disease activity also began in early November and continued for 22 weeks until early April 2004. Health care providers should consider RSV as a cause of acute respiratory disease in all age groups, and implement appropriate isolation precautions, according to the CDC.

—Sharon Worcester

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