

Evaluation and Monitoring During Treatment of Latent Tuberculosis Infection (LTBI)

All patients should have the following:

- An initial pre-treatment clinical evaluation to rule out active TB disease and to assess for the likelihood of adverse effects of therapy
- Rule out pregnancy prior to starting isoniazid-rifapentine (INH-RPT) regimen
- Voluntary HIV counseling and testing
- Education about adverse effects associated with treatment of LTBI, with advise to stop treatment and promptly seek medical evaluation if serious adverse effects occur
- A follow-up evaluation at least monthly, including careful questioning and a brief physical examination to assess for evidence of hepatitis or other adverse effects, symptoms of active TB disease, and adherence to the regimen. Patients receiving the INH-RPT regimen should have a monthly physical exam to assess for the presence of jaundice, liver tenderness, and rash.

See Treatment for Latent Tuberculosis Infection (LTBI): Monitoring Flow Sheet at www.health.state.mn.us/divs/idepc/diseases/tb/flowsht.pdf for further assistance with this process.

Laboratory testing is not routinely recommended.

Indications for baseline LFTs, including serum bilirubin and either AST (SGOT) or ALT (SGPT):

- Foreign-born from areas where viral hepatitis is endemic and for whom complete hepatitis serology results are unknown
- HIV infection
- Pregnancy or ≤ 3 months postpartum
- History or initial evaluation indicative of hepatitis or cirrhosis
- Regular alcohol use

Indications for monthly LFTs, including serum bilirubin and either AST (SGOT) or ALT (SGPT):

- Abnormal baseline LFTs
- Chronic liver disease
- Regular alcohol use

Medication should be withheld and patient evaluated promptly if:

- Transaminase levels > 3 times upper limit of normal in persons with symptoms of hepatitis
- Transaminase levels > 5 times upper limit of normal in asymptomatic persons
- If patient becomes pregnant while receiving INH-RPT, discontinue regimen

- Adapted by the Minnesota Department of Health from materials developed by the Charles P. Felton National Tuberculosis Center at Harlem Hospital, New York, NY.
- Centers for Disease Control and Prevention. Recommendations for the Use of an Isoniazid-Rifapentine Regimen with Direct Observation to Treat Latent *Mycobacterium tuberculosis* Infection. MMWR 2011;60:1650-1653.



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