



Treatment for TB Disease

Patient Name: _____

Date of Birth: _____

What medicine will I take?

For the **first 2 months**, you will take:

- ☐ Isoniazid
- ☐ Rifampin
- ☐ Ethambutol
- ☐ Pyrazinamide
- ☐ Levofloxacin
- ☐ _____
- ☐ Pyridoxine (vitamin B6) – Your doctor may give you vitamin B6. Isoniazid can cause numbness and tingling in your hands and feet. Vitamin B6 helps prevent this.

After the first 2 months, the medicine you take may change. Most people will take rifampin and isoniazid until the end of their treatment. Depending on the type of TB you have, the other medicines may be stopped or continued.

How often will I take my medicine?

For the **first 2 months**, you will take medicine:

- ☐ Once a day
- ☐ 5 days a week (Monday to Friday)

After the first 2 months, your nurse will let you know how often you will take your medicine. Most people will either take their medicine 3 days a week, 5 days a week or once a day. It will depend on the type of TB you have.

How long will I take medicine?

Treatment usually takes 6 to 9 months and has two phases: the initial phase and the continuation phase.

- The **initial phase** is the first phase of treatment and is 2 months long.
- The **continuation phase** is a longer phase of treatment after the initial phase, lasting between 4 to 7 months long.

Sometimes, treatment is longer than 6 to 9 months. Each person's treatment plan is different.

People with TB disease will feel sick and may be able to spread TB to others.

It is important to take all of your medicine to treat TB disease.

How will I take my medicine?

Directly observed therapy (DOT) is the standard treatment for TB disease. In DOT, a trained healthcare worker brings your medicine directly to you and watches you swallow it.

Sometimes, people take their medicine by electronic DOT (eDOT). During eDOT, a healthcare worker meets with you virtually (online) rather than in person.

You can take food with your medicine if you need to. Some people find taking the medicine with food helps with side effects such as stomach upset.

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Why is DOT important?

Using DOT:

- will help you complete your treatment and prevent you from becoming sick again
- helps the TB team make sure you are doing well with treatment
- prevents the TB from becoming resistant to the medicine
- protects your family and community by preventing the spread of TB

How does DOT work?

During your DOT visit, your nurse or DOT worker will:

- contact you at the planned time
- ask you to spell your full name
- ask you to state your date of birth
- ask you how you did with your last dose
- give you your medicine and watch you take it
- confirm the date and time of your next DOT
- answer any questions you may have

What if I miss a dose?

You will stay on treatment until you have taken all of your doses, including those you missed. The treatment may not work if you do not take all your medicine.

Can I take my other medicines?

Your TB doctor and pharmacist will check to see if it is safe to take your TB medicine with other medicines you are taking. Your TB nurse will let you know if there are any problems between the medicines.

Avoid antacids 1 hour before or 2 hours after taking your TB medicine. Antacids include medicines like:

- aluminum hydroxide/magnesium hydroxide/simethicone (**Maalox™**)
- donepezil (**Diovol®**)
- aluminum hydroxide (**Amphogel®**)
- bismuth subsalicylate (**Pepto-Bismol®**)
- calcium carbonate (**Tums®**)

Some medicines used for stomach problems (heartburn) may not work as well when taking TB medicine. Let your TB doctor and nurse know if you start having more stomach troubles.

Birth control pills, rings, shots, and the patch may not work while taking TB medicine. To avoid an unplanned pregnancy, barrier forms of birth control (diaphragms or condoms) should be used during treatment and for 2 weeks after treatment.



*TB Prevention and Control Saskatchewan.
Medicines used to treat TB disease. 2012.*

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What to watch for:

It is normal for your tears, saliva, sweat and urine (pee) to turn orange-red in colour while taking rifampin. This will stop when the rifampin is stopped. Rifampin may stain contact lenses and dentures. Wear glasses instead of contact lenses, and take your dentures out when possible. Use diapers that can be thrown away.

Side effects may occur when taking medicine.

Tell your TB doctor or nurse if you have:

- Stomach upset or pain
- Nausea or vomiting (throwing up)
- Loss of appetite (not hungry)
- Diarrhea
- Headache, confusion, dizziness or fainting
- Fever
- Feeling tired or weak
- Itching, rash or hives
- Yellowing of the eyes or skin
- Muscle aches or joint pain
- Pain, numbness or tingling in hands, arms, legs or feet
- Easy bruising or bleeding
- Blurred vision or eye pain
- Photosensitivity (rash, sunburn or sensitive eyes to sunlight)
- Tendinitis or tendon rupture (uncommon)

Additional instructions:

- Avoid alcohol while taking TB medicine
- Tell your other doctors, nurses and local pharmacist you are taking TB medicine
- Tell your nurse or DOT worker if you will be away for DOT or if you plan to move
- Tell your TB doctor, nurse or pharmacist if you:
 - ☐ have concerns or side effects
 - ☐ start a new medicine
 - ☐ stop any of your medicines
 - ☐ become pregnant, plan to become pregnant or if you wish to breastfeed your baby

Your healthcare team and plan:

Date: _____

TB Doctor: _____

TB Nurse Clinician: _____

Local Nurse: _____

DOT Worker(s): _____

Planned start date: _____

**To learn more, contact
TB Prevention and Control Saskatchewan**
1-866-780-6482 or
Saskatoon Main Office 306-655-1740
Prince Albert Office 306-765-4260
Regina Office 306-766-4311

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