ABSTRACT BOOK ABSTRACTS



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INFECTIOUS DISEASES (BACTERIAL, FUNGAL, VIRAL, PARASITIC, INFESTATIONS)

SUCCESSFUL TREATMENT OF BORDERLINE LEPROMATOUS LEPROSY WITH SUSPECTED RIFAMPICINE RESISTANCY USING CLOFAZIMINE-OFLOXACIN-MINOCYCLINE REGIMEN

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Background: Leprosy is a disease caused by Mycobacyterium leprae and remains a major public health problem in many areas of the world; Indonesia reports the third highest number of new cases each year. Efforts to reduce leprosy led the World Health Organization in 1982 to initiate a program introducing multidrug therapy (MDT) which has been effective at reducing both the prevalence and incidence globally. However, with worldwise usage of MDT, emerge rifampicin resistance, the most important component of the MDT regimen. It is associated with bacillus persistence and unending chains of transmission. An alternative therapy is required for leprosy patients with rifampicin resistance.

Observation: A male of 32 years old presents with borderline lepromatous leprosy, and has received multibacillary MDT for 2 years. The initial bacterial index (BI) when he first received MDT was 3+, with morphological index (MI) of 74%. After 12 doses of MDT, the BI falls into 2+ and MI into 23% so treatment with MDT is continued for one more year. After 2 years of MDT regimen, bacilli are still found in acid fast bacilli (AFB) test with BI of 2+ and MI of 11%. Drug resistance caused by genetic mutation can be detected with polymerase chain reaction, but it is not done to the patient due to limited availability and costly considerations. The MDT regiment is then changed to clofazimine-ofloxacin-minocycline for 6 months, continued with clofazimine-ofloxacin for the next 18 months. After a therapy for 2 years and no bacillus is found AFB test, the patient is declared released from treatment.

Key message: Surveillance of drug resistance globally is a key factor in monitoring MDT effectiveness and preventing the spread of drug resistance. The combination therapy of clofazimine-ofloxacin-minocycline can be used as an alternative therapy to leprosy patients with rifampicin resistance.





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