

Wisconsin Tuberculosis (TB) Program Statement on 4-month HPMZ Regimen for TB Disease



The Wisconsin TB Program currently **cannot support initiation of a 4-month isoniazid rifapentine moxifloxacin pyrazinamide (HPMZ) regimen** for patients receiving medications through the Wisconsin TB Dispensary Program due to cost and lack of availability of rifapentine.

Background

A recent clinical trial ([Study 31/A5349](#)) identified a daily 4-month regimen that is as effective as the standard daily 6-month regimen in curing drug-susceptible tuberculosis.

What is added by this report?

This report provides a recommendation for using a 4-month regimen consisting of 8 weeks of daily treatment with rifapentine (RPT), isoniazid (INH), pyrazinamide (PZA), and moxifloxacin (MOX), followed by 9 weeks of daily treatment with RPT, INH, and MOX in patients with drug-susceptible tuberculosis.

What are the implications for public health practice?

The 4-month HPMZ regimen is a treatment option for patients aged ≥ 12 years with drug-susceptible pulmonary tuberculosis.

4-month HPMZ Daily Regimen

- Isoniazid ≥ 40 kg, 300 mg
- Rifapentine ≥ 40 kg, 1200 mg
- Moxifloxacin ≥ 40 kg, 400 mg
- Pyrazinamide
 - 40kg–<55 kg, 1,000 mg
 - ≥ 55 kg–75kg, 1,500 mg
 - >75 kg, 2,000 mg

Exclusion criteria

The Centers for Disease Control and Prevention (CDC) does not recommend this regimen for those who:

- Are younger than 12 years old.
- Have a body weight below 40 kilograms (kg).
- Are pregnant or breastfeeding.
- Have most types of suspected or documented extrapulmonary TB.
- Have a history of prolonged QT syndrome or concurrent use of one or more QT-prolonging medications in addition to MOX.
- Are receiving medications with known clinically relevant drug-drug interactions with INH, RPT, PZA, or MOX.

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Barriers to implementation

Nationwide **shortages of rifapentine** have created difficulty in procurement of this medication. High dose daily rifapentine in this regimen cannot be ensured by the Wisconsin TB Dispensary Program at this time.

If you are still interested in the regimen, please contact the Wisconsin TB Program via [email](mailto:DHSWITBProgram@dhs.wisconsin.gov) (DHSWITBProgram@dhs.wisconsin.gov) or phone (608-261-6319).

Recommendations for directly observed therapy (DOT) **still apply**. In-person DOT is encouraged, but electronic DOT (eDOT) may be used in certain cases.

See [Wisconsin Electronic Video Directly Observed Therapy \(P-03325\)](#) publication on eDOT for more details.

Resources

- [Morbidity and Mortality Weekly Report \(MMWR\)](#) (February 25, 2022)
- Dorman et al (2021). [Four-Month Rifapentine Regimen with or without Moxifloxacin for Tuberculosis.](#)
- CDC "[Treatment for TB Disease](#)," including FAQ and clinical tools for providers

