Rifapentine has been shown to be effective for treatment of tuberculosis when given once per week. It is a rifamycin derivative with a longer half-life than rifampin.

Compared with the standard regimen of twice a week treatment, once a week treatment during the continuation phase reduces by 30% the number of contacts needed between the patient and the directly observed therapy provider.

Rifapentine once a week, during the continuation phase, is safe and effective for treatment of pulmonary tuberculosis in HIV-negative people without cavitation on chest radiography. The usual dose is 600 mg (4 tablets, 150 mg each, taken at the same time) with isoniazid once weekly for 4 months during the continuation phase of treatment for drug-susceptible tuberculosis.

Indication for use:

- Completion of 2 month initial phase of treatment for active tuberculosis disease using a standard regimen of isoniazid, rifampin, pyrazinamide, and ethambutol.
- TB isolate demonstrates susceptibility to above first-line TB drugs.
- Documentation of a negative HIV test.
- Chest x-ray impression documents non-cavitary TB.
- Documentation of 3 consecutive negative smears from sputum collected on different days.

REFERENCES AND NOTES


For more information about tuberculosis treatment, call the TB Program at (608) 266-9692.