

Latent Tuberculosis Guidelines for Cancer Patients

Cancer Patients are at a greater risk of developing active tuberculosis due to their immunosuppression if they have latent TB.

Refer to NICE Clinical Guidance CG117 (March 2011) for guidance on the management of latent tuberculosis section 1.6

<http://www.nice.org.uk/nicemedia/live/13422/53642/53642.pdf>

Below is a summary of the guidance applicable to adult cancer patients:

Summary

The following people should be considered for latent TB treatment:

- People with past history of TB or evidence of TB scars on chest X-ray,

At the earliest opportunity patients suspected of latent TB should be referred to a chest physician.

People who have agreed to receive treatment for latent TB infection should be started on one of the following regimens:

- either 6 months of isoniazid OR 3 months of rifampicin and isoniazid for people not known to have HIV
- 6 months of isoniazid for people of any age who have HIV

People eligible for treatment of latent TB infection, but who decline to take this treatment, should be given 'Inform and advise' information about TB and have chest X-rays 3 and 12 months later.

Dose of single agent Isoniazid in adults: 300mg orally daily for 6 months

Dose of combination therapy in adults: isoniazid 300mg orally daily and rifampicin 600mg orally daily (450mg daily if <50kg) for 3 months