

Chief Directorate: Emergency & Clinical Services Support

Reference: 19/4/4

Enquiries: Jacqueline Voget & Vanessa Mudaly

CHIEF DIRECTORS: METRO HEALTH SERVICES, RURAL HEALTH SERVICES, STRATEGY

DIRECTOR:

CITY HEALTH

DIRECTORS:

DISTRICTS AND SUB STRUCTURES, PHARMACY SERVICES

CEOs:

HOSPITALS

FOR ATTENTION:

FACILITY MANAGERS, PHARMACISTS, PHARMACY ASSISTANTS, MEDICAL

OFFICERS, CLINICAL NURSE PRACTITIONERS, NIMART NURSES

CIRCULAR H 149./2021

REVISED 2021 DRUG SENSITIVE TUBERCULOSIS DRUG DOSING CHART FOR CHILDREN < 8 YEARS AND/OR < 25 KG

Background

The purpose of this circular is to inform service providers of the revised TB dosing chart for children under the age of 8 and < 25kg. This circular will replace circular H02/2020.

The National anti-Tuberculosis medicines contract includes two new dispersible paediatric TB fixed dose combination formulations:

| Ingredients | Tradename | ICN | Cost |
|--------------------------------------------------|--------------------------|---------|--------|
| Rifampicin & Isoniazid 7.5/50mg tablet (84's) | Afaris Paed 75/50 | 3769283 | R78.10 |
| Rifampicin, Pyrazinamide & Isoniazid 75/150/50mg | Co-Afaris Paed 75/50/150 | 3768805 | R95.30 |
| tablet (84's) | | | |

The National Essential Medicines List Committee have approved the following updated weight-band dosing tables for the management of paediatric TB and they are available in PHC and Paediatric Hospital level STG:

- Uncomplicated pulmonary tuberculosis
- Complicated pulmonary tuberculosis
- Disseminated (Miliary) TB
- Tuberculous meningitis (TBM)

Implementation

The new formulations have been included in the WC Provincial Code List and can be ordered from the CMD with immediate effect.

JO Arendse
Chief Director: ECSS

Date: 09/09/21

TB Drug Dosing Chart for Children < 8 years and/or < 25 kg With Drug-Susceptible/Presumed Drug-Susceptible Uncomplicated TB and Complicated TB (2021)

(excluding TB meningitis / central nervous system TB / miliary TB – refer to chart on next page)

| | | nted TB disease | Complicated TB disease (excluding TB meningitis – refer to chart on next page) | | | |
|-----------------------------------------------------|-------------------------------------------------------------|------------------------------------------------------|--------------------------------------------------------------------------------|----------------------------------------------------------|-------------------------------------------------------|-----------------------------------------------------|
| | Intensive phase 2 months Once daily 7 days a week | Continuation phase 4 months Once daily 7 days a week | Intensive 2 mon Once o 7 days a | iths daily | Continuation phase 4 months* Once daily 7 days a week | |
| Target dose or dose range (mg/kg/dos e) | HRZ H: 10 (7-15) R: 15 (10-20) Z: 35 (30-40) | HR H: 10 (7-15) R: 15 (10-20) | HRZ H: 10 (7-15) R: 15 (10-20) Z: 35 (30-40) | E 20 (15-25) | HR H: 10 (7-15) R: 15 (10-20) | Target dose or dose range (mg/kg/dos e) |
| Formulation Body weight (kg) | HRZ 50/75/150 mg dispersible tablet (scored) | HR 50/75 mg dispersible tablet (scored) | HRZ 50/75/150 mg dispersible tablet (scored) | E 400 mg tablet (not scored) OR 400 mg/8 ml # suspension | HR 50/75 mg dispersible tablet (scored) | Formulation Body weight (kg) |
| <2 | | v. | Obtain expert advic | | | <2 |
| 2 - 2.9 | ½ tab or 2 ml 8 | ½ tab or 2 ml 8 | ½ tab or 2 ml δ | 1 ml # | ½ tab or 2 ml § | 2 - 2.9 |
| 3 - 3.9 | 3/4 tab or 3 ml 8 | 34 tab or 3 ml 8 | ³ / ₄ tab or 3 ml δ | 1.5 ml # | 3/4 tab or 3 ml ⁸ | 3 - 3.9 |
| 4 – 7.9 | 1 tab or 4ml | 1 tab or 4 ml | 1 tab or 4 ml | 2.5 ml # | 1 tab or 4 ml | 4 – 7.9 |
| 8 - 11.9 | 2 tabs or 8 ml | 2 tabs or 8 ml | 2 tabs or 8 ml | ½ tab or 4 ml # | 2 tabs or 8 ml | 8 - 11.9 |
| 12 - 15.9 | 3 tabs or 12 ml | 3 tabs or 12 ml | 3 tabs or 12 ml | 3/4 tab or 6 ml # | 3 tabs or 12 ml | 12 - 15.9 |
| 16 - 24.9 | 4 tabs or 16 ml | 4 tabs or 16 ml | 4 tabs or 16 ml | 1 tab or 8 ml # | 4 tabs or 16 ml | 16 - 24.9 |

<u>Uncomplicated TB disease in children</u> = peripheral lymphadenitis; uncomplicated intrathoracic TB (hilar or mediastinal lymphadenopathy, minimal bronchopneumonia, simple pleural effusion)

<u>Complicated TB disease in children (excluding central nervous system TB or miliary TB)</u> = complicated/severe intrathoracic TB (extensive bronchopneumonia, cavitatory disease, smear-positive disease, TB empyema); severe forms of extrapulmonary TB (including TB pericarditis, TB abdomen, osteoarticular

H =Isoniazid, R =Rifampicin, Z =Pyrazinamide, E =Ethambutol

Children should be taught and encouraged to swallow whole tablets or, if required, fractions of tablets so as to avoid large volumes of liquid medication

- ⁶ If oral suspension required, for each dose, disperse 1 x HRZ or 1 x HR 50/75 mg tablet in 4 ml of water, administer required dose, discard unused suspension
- # If oral suspension required, for each dose, crush 1 x Ethambutol 400 mg tablet to a fine powder, disperse in 8 ml of water to prepare a concentration of 400 mg/8 ml (50 mg/ml), administer required dose as indicated in above chart, discard unused suspension
- * Guided by expert opinion, the continuation phase may be prolonged to 7 months or more in slow responders and children with HIV

TB Drug Dosing Chart for Children < 8 years and/or < 25 kg With Drug-Susceptible/Presumed Drug-Susceptible TB Meningitis / Central Nervous System TB / Miliary TB)

| Body weight (kg) | Single | | | |
|------------------------|-------------------------------------------|---------------------------------------------------------------------|--------------------------------------------------------|------------------------|
| | HR • 60/60 mg dispersible tablet (scored) | 7 = 500 mg tablet (scored) or 500 mg/8 ml suspension | Eto " 250 mg tablet (scored) or 250 mg/8 ml suspension | Body weight (kg) |
| <2 | Obt | ain expert advice | | |
| 2 - 2.9 | 34 tab or 3 ml | 1 ml | 1.5 ml | 2-2.9 |
| 3 – 3.9 | 1 tab or 4 ml | 2 ml | 2 ml | 3 – 3.9 |
| 4 – 4.9 | 1 ½ tabs or 6 ml | 2.5 ml | 2.5 ml | 4 – 4.9 |
| 5 - 5.9 | 1 % tabs or 7 ml | 3 ml | 3 ml | 5 - 5.9 |
| 6 - 6.9 | 2 tabs or 8 ml | | 1/2 tab or 4 ml | 6-6.9 |
| 7 - 8.9 | 2 ½ tabs or 10 ml | ½ tab or 4 ml | 72 TOD OF 4 MI | 7 - 8.9 |
| 9 – 9.9 | 3 tabs or 12 ml | | 3/ 4-15 /1 | 9 - 9.9 |
| 10 – 11.9 | 3 ½ tabs or 14 mi | 3/4 tab or 6 ml | 3/4 tab or 6 ml | 10 – 11.9 |
| 12 - 12.9 | 4 tabs or 16 ml | |] 4-5 0 l | 12 – 12.9 |
| 13 - 14.9 | 4 ½ tabs or 18 ml | I tab or 8 mi | 1 tab or 8 ml | 13 – 14.9 |
| 15 – 16.9 | 5 tabs or 20 ml | | 1 1/ 1-5 | 15 - 16.9 |
| 17 - 17.9 | 5 ½ tabs or 22 ml | | 1 1/4 tabs or 10 ml | 17 – 17.9 |
| 18 – 19.9 | 5 ½ IGDS OF 22 MI | 1 1/4 tabs or 10 ml | 11/1-1-10 | 18 – 19.9 |
| 20 - 24.9 | 6 tabs or 24 ml | 1 ½ tabs or 12 ml | 1 ½ tabs or 12 ml | 20 - 24.9 |

H =Isoniazid, R =Rifampicin, Z =Pyrazinamide, E =Ethambutol

Children should be taught and encouraged to swallow whole tablets or, if required, fractions of tablets so as to avoid large volumes of liquid medication if possible

⁸ If oral suspension required, for each dose, disperse 1 x HR 60/60 mg tablet in 4 ml of water, administer required dose as indicated in above chart, discard unused suspension

TB Drug Dosing Chart for Children ≥ 8 years and/or ≥ 25 kg, adolescents & adults with Drug-Susceptible/Presumed Drug-Susceptible TB All forms of TB disease

| Body weight (kg) | Intensive phase 2 months Once daily 7 days a week | Continuation phase 4 months Once daily 7 days a week | | Body weight |
|------------------------|------------------------------------------------------------|------------------------------------------------------|-----------------------------|----------------|
| | HRZE tablets 75/150/400/275 mg | HR tablets 75/150 mg | HR tablets 150/300 mg | (kg) |
| 25 - 37 | 2 tabs | 2 tabs | | 25 - 37 |
| 38 - 54 | 3 tabs | 3 tabs | | 38 - 54 |
| 55 - 70 | 4 tabs | 1100 张 按 | | 55 - 70 |
| ≥71 | 5 tabs | 2 tabs | ≥71 | |

^{*}Guided by expert opinion, the continuation phase may be prolonged to 7 months or more in some severe forms of TB including central nervous system TB, miliary TB and osteoarticular TB

Adapted from World Health Organisation Guidance for national tuberculosis programmes on the management of tuberculosis in children, second edition (2014)

^E If oral suspension is required, crush 1 x 500 mg Pyrazinamide tablet to a fine powder, disperse in 8 ml water to prepare a concentration of 500 mg/8 ml (62.5 mg/ml), administer required dose as indicated in above chart, discard unused suspension

[#] If oral suspension is required, crush 1 x 250 mg Ethionamide tablet to a fine powder, disperse in 8 ml of water to prepare a concentration of 250 mg/8 ml (31.3 mg/ml), administer required dose as indicated in above chart, discard unused suspension