

REGIMEN FOR TREATMENT OF TB IN CHILDREN

TB disease category	Recommended regimen	
	Intensive phase	Continuation phase
All forms of TB (Except TB meningitis and TB of the bones and joints)	2 months RHZE	4 months RH
TB meningitis TB of the bones and joints	2 months RHZE	10 months RH
Drug resistant TB	Refer to a DR TB specialist and inform CTLC	

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

For previously treated children who present with symptoms of TB within two **years** of completing anti-TB treatment, evaluate for drug resistant TB, progressive HIV disease or other chronic lung disease.

Make every effort to diagnose the child and manage as per the algorithm for TB diagnosis.

Ethambutol is safe and can be used in children in doses not exceeding 25mg/kg/day

DOSAGES FOR PEDIATRIC TB TREATMENT (IMPROVED FORMULATIONS)

DOSAGES FOR A CHILD WEIGHING UP TO 3.9 KG

Weight bands (Kg)	Number of tablets				
	Intensive Phase			Continuation Phase	
	RHZ (75/50/150mg)	E(100mg)	How to reconstitute the medicines	RH(75/50mg)	How to reconstitute the medicines
Less than 2 Kg	¼	¼	Dissolve one (1) tablet of RHZ in 20 ml of safe drinking water. Once fully dissolved, add the completely crushed one (1) tablet of Ethambutol and give 5ml (1/4) of this solution measured with a syringe.	¼	Dissolve one (1) tablet of RH in 20 ml of safe drinking water. Once fully dissolved, give 5ml (1/4) of this solution measured with a syringe.

2 – 2.9	$\frac{1}{2}$	$\frac{1}{2}$	Dissolve one (1) tablet of RHZ in 20 ml of safe drinking water. Once fully dissolved, add the completely crushed one (1) tablet of Ethambutol and give 10ml (1/2) of this solution measured with a syringe.	$\frac{1}{2}$	Dissolve one (1) tablet of RH in 20 ml of safe drinking water. Once fully dissolved, give 10ml (1/2) of this solution measured with a syringe.
3 – 3.9	$\frac{3}{4}$	$\frac{3}{4}$	Dissolve one (1) tablet of RHZ in 20 ml of safe drinking water. Once fully dissolved, add the completely crushed one (1) tablet of Ethambutol and give 15ml (3/4) of this solution measured with a syringe.	$\frac{3}{4}$	Dissolve one (1) tablet of RH in 20 ml of safe drinking water. Once fully dissolved, give 15ml (3/4) of this solution measured with a syringe.

Ethambutol is not dispersible. Crush it completely before adding to the prepared solution of RHZ during the intensive phase.

After giving the child their dose for that day, discard the rest of the solution. Prepare a fresh solution every day.

DOSAGES FOR A CHILD WEIGHING 4-25 KG

Weight bands (Kg)	Number of tablets				
	Intensive Phase			Continuation Phase	
	RHZ (75/50/150mg)	E(100mg)	How to reconstitute the medicines	RH(75/50mg)	How to reconstitute the medicines
4 - 7.9	1	1	Dissolve the tablet(s) of RHZ	1	Dissolve the tablet(s) of RH

8 - 11.9	2	2	in 20 ml of safe drinking water. Once fully dissolved, add the completely crushed tablet(s) of Ethambutol and give ALL of this solution to the child	2	in 20 ml of safe drinking water. Once fully dissolved give ALL of this solution to the child.
12 - 15.9	3	3		3	
16 - 24.9	4	4		4	
25 kg and above	Use adult dosages and preparations				

DOSAGES FOR A CHILD WEIGHING 25KGS AND ABOVE (ADULT FORMULATION DOSAGE TABLE)

Weight band (Kg)	Number of tablets	
	Intensive Phase	Continuation Phase
	RHZE (150/75/400/275mg)	RH(150/75mg)
25 – 39	2	2
40 - 54	3	3
55kg and above	4	4

PYRIDOXINE (VITAMIN B6) DOSING FOR CHILDREN ON TB TREATMENT

Weight (Kgs)	Dose in mg	Number of 25mg tablets	Number of 50mg tablets
Less than 5	6.25 mg	Half a tablet 3 TIMES PER WEEK	Not suitable for young infant
5.0 – 7.9	12.5 mg	Half a tablet daily	Half of 50mg tablet 3 TIMES PER WEEK
8.0 – 14.9	25 mg	One tablet daily	Half of 50mg tablet daily
15 kg and above	50 mg	Two tablets daily	One 50mg tablet daily