

**Auer, C, Lagahid, J, Roa, C, Ang, C, Van Deun, A, Weiss, MG and Tanner, M, "TB treatment under various forms of DOT: does it matter in terms of sputum conversion and treatment outcome?," *The International Journal of Tuberculosis and Lung Disease*, Vol. 10, No. 11, (November) 2006, Supplement 1: S181.**

**Background:** DOT is often not uniformly implemented and it not clear how important strict implementation of DOT is to achieve cure.

**Methods:** Thrice- weekly anti- TB therapy was randomly assigned to 10 of the 20 public health centers of Taguig, Philippines. The TB patients of the other 10 health centres received daily therapy. Sputum and culture tests were performed at 2 or 3 months of treatment. Sputum conversion and treatment outcome were compared between patients with various modes of treatment supervision and also between patients under thrice- weekly and patients under daily therapy.

**Results:** Whatever the mode of treatment supervision (fully facility- based DOT, or self- administered treatment) approximately 20% were still sputum smear- or culture positive at 2 or 3 months of treatment. The rate of adverse treatment outcome (failure or relapse) was similar whatever the mode of treatment supervision. More patients under thrice- weekly therapy than patients under daily therapy were still sputum smear- or culture positive at 2 or 3 months of treatment (25% vs. 16%;  $P= 0.01$ ). But the rate of adverse treatment outcome (failure or relapse) was similar (5.9% vs. 4.6%).

**Conclusion:** The mode of supervision does not influence sputum conversion rate nor treatment outcome. Thrice- weekly therapy is inferior to daily therapy in terms of sputum smear conversion rate but probably not in terms of adverse treatment outcome.