



Q Sp 30: Is there a difference in the duration of drug therapy between patients who are conservatively treated and those who undergo surgical debridement and stabilization?



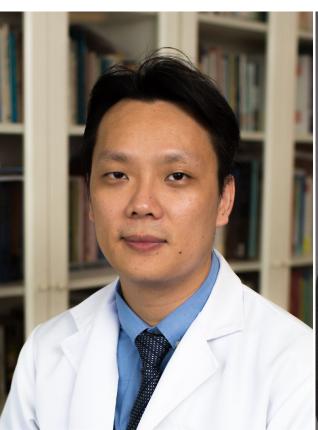
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Why is this topic Important

- Antitubercular drugs have poor bone penetration leading to longer duration of treatment
- Surgical removal can potentially reduce chemotherapy duration
- Concerns with longer duration of treatment: Drug interactions, increasing side effects, worse patient tolerance and poor compliance
- Improved surgical outcomes like alignment and fusion rates suggest reexploration of the duration of chemotherapy





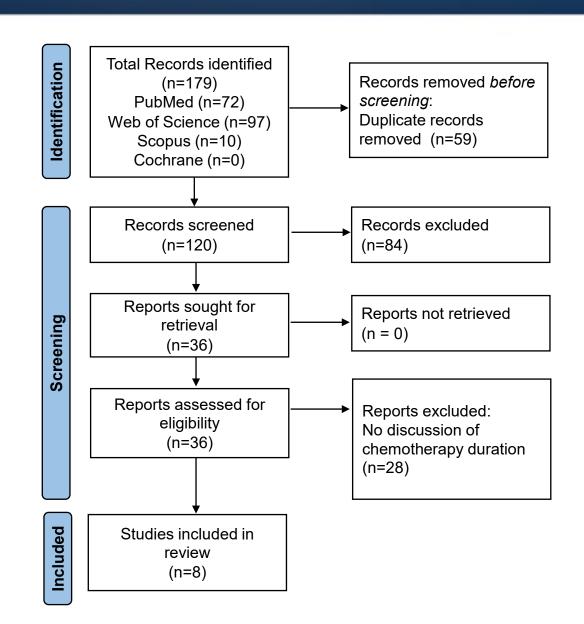
Literature Review/ Process



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Findings from Literature

- The 8 studies included were mostly from retrospective studies except the MRC trial and 1 recent RCT
- The 14th report of the MRC trials suggests 6- or 9-month regimens are the same as 18-month regimens. 9-month isoniazid plus PAS fared poorly
- The one recent RCT compared 6 vs 12-month treatment: The 6-months group had no worse outcomes regardless of surgical intervention. Surgical group had generally more severe pain and radiologic at-risk signs





Findings from Literature

- 5 studies noted 6-month is adequate for eradication of disease
- 2 studies suggested 9-months (1 had no comparison, the other noted 6-month group had more negative outcomes with kyphosis)
- 1 study noted <12 months is adequate with radical surgery
- One study recommended that 4.5 months of treatment is adequate with radical surgery and instrumentation





Question:

Is there a difference in the duration of drug therapy between patients who are conservatively treated and those who undergo surgical debridement and stabilization?





Response:

No. The duration of drug therapy should be the same for conservative and surgically managed TB spondylodiscitis.

Strength of recommendation: moderate







Agree – 92.9%, Disagree – 2.4%, Abstain – 4.8% (Unanimous Consensus)