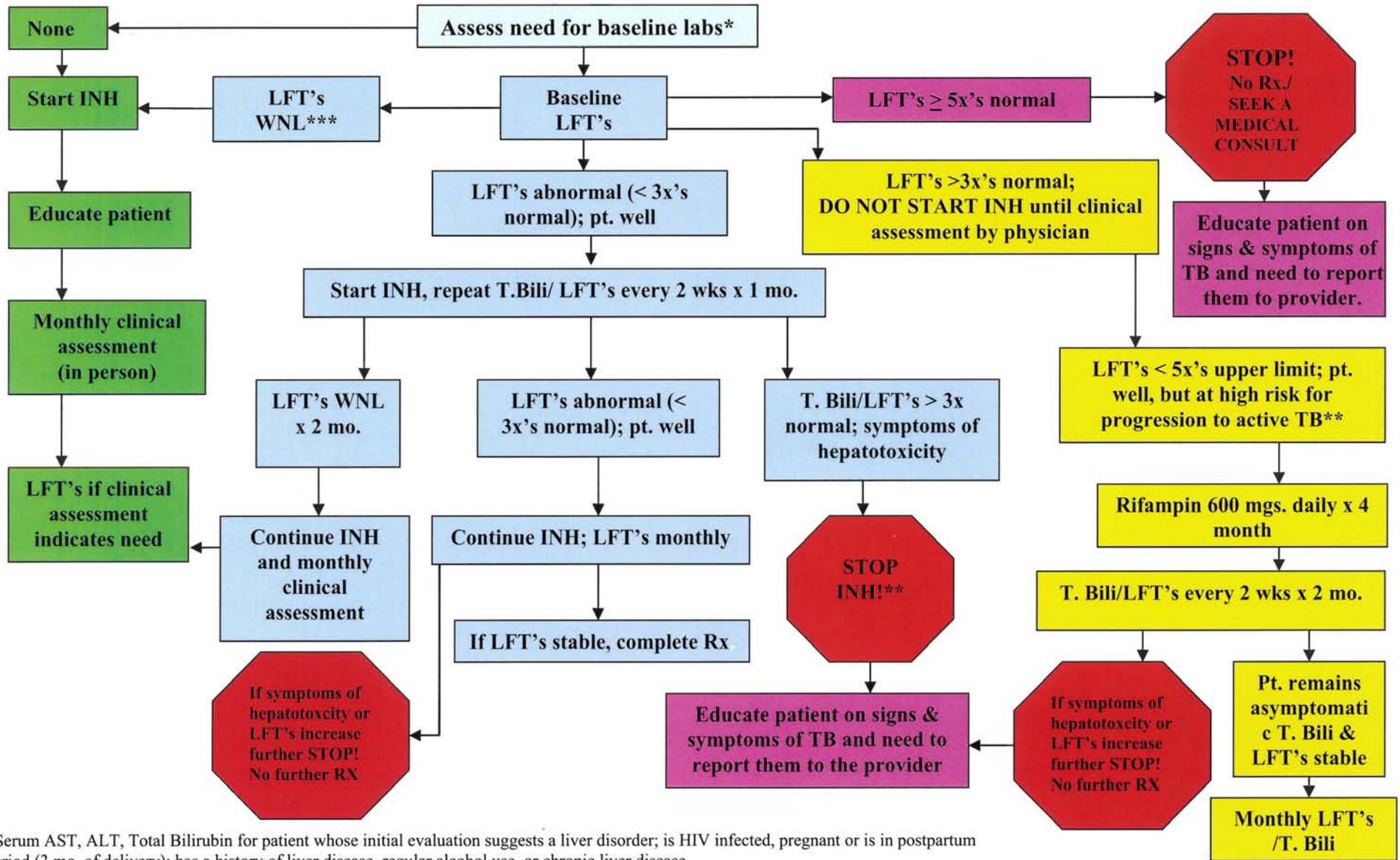


Assessing and Managing the Risk of Liver Disease in the Treatment of LTBI



*Serum AST, ALT, Total Bilirubin for patient whose initial evaluation suggests a liver disorder; is HIV infected, pregnant or is in postpartum period (3 mo. of delivery); has a history of liver disease, regular alcohol use, or chronic liver disease.

**Patients may be considered for treatment with daily Rifampin x 4 mo. especially if they are at high risk for progression to active disease. A CBC with platelet count should be drawn prior to initiation of Rifampin therapy. Adverse effects of treating LTBI serious enough to entail hospital admission or death also should be reported to the CDC through local public health authorities or by calling 404-639-8401.

*** If significant risk of underlying liver disease continue monthly monitoring of T.Bili/LFT's.

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