

Correspondence

Should pyrazinamide be preferred in tuberculosis treatment during pregnancy?

Sir,

We have read the recent clinical image by Garg and Mohapatra¹ which is very interesting. They described a pregnant woman with tuberculosis who was treated with isoniazid, rifampicin, pyrazinamide and ethambutol for two months followed by isoniazid and rifampicin for four months. According to the current guidelines, the recommended treatment of tuberculosis in pregnancy is with isoniazid, rifampicin and ethambutol. Pyrazinamide is not recommended due to inadequate data on teratogenicity². However, the authors detected mild intrauterine growth restriction in foetus by obstetrical ultrasound at presentation. They should clarify whether pyrazinamide is a suitable choice in tuberculosis treatment during pregnancy.

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References

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