Latent Tuberculosis Infection Treatment Regimens

Treatment regimens for latent TB infection (LTBI) use isoniazid (INH), rifapentine (RPT), or rifampin (RIF). CDC and the National Tuberculosis Controllers Association preferentially recommend short-course, rifamycin-based, 3- or 4-month latent TB infection treatment regimens over 6- or 9-month isoniazid monotherapy.

Clinicians should choose the appropriate treatment regimen based on drug susceptibility results of the presumed source case (if known), coexisting medical conditions (e.g., HIV*), and potential for drug-drug interactions.

https://www.cdc.gov/mmwr/volumes/69/rr/rr6901a1.htm?s_cid=rr6901a1_w

	DRUG	DURATION	FREQUENCY	TOTAL DOSES	DOSE AND AGE GROUP
Preferred	ISONIAZID† AND RIFAPENTINE†† (3HP)	3 months	Once weekly	12	Adults and children aged ≥12 yrs INH: 15 mg/kg rounded up to the nearest 50 or 100 mg; 900 mg maximum RPT: 10-14.0 kg; 300 mg 14.1-25.0 kg; 450 mg 25.1-32.0 kg; 600 mg 32.1-49.9 kg; 750 mg ≥50.0 kg; 900 mg maximum Children aged 2-11 yrs INH†: 25 mg/kg; 900 mg maximum RPT††: See above
	RIFAMPIN ^s (4R)	4 months	Daily	120	Adults: 10 mg/kg; 600 mg maximum
					Children: 15–20 mg/kg [®] ; 600 mg maximum
	ISONIAZID† AND RIFAMPIN§ (3HR)	3 months	Daily	90	Adults INH [†] : 5 mg/kg; 300 mg maximum RIF [§] : 10 mg/kg; 600 mg maximum Children INH [†] : 10-20 mg/kg [#] ; 300 mg maximum RIF [§] : 15-20 mg/kg; 600 mg maximum
Alternative	ISONIAZID† (6H/9H)	6 months	Daily	180	Adults Daily: 5 mg/kg; 300 mg maximum Twice weekly: 15 mg/kg; 900 mg maximum
			Twice weekly¶	52	
		9 months	Daily	270	Children Daily: 10-20 mg/kg*; 300 mg maximum Twice weekly: 20–40 mg/kg*; 900 mg maximum
			Twice weekly¶	76	

^{*}For persons with HIV/AIDS, see Guidelines for the Use of Antiretroviral Agents in Adults and Adolescents Living with HIV available at: https://aidsinfo.nih.gov/guidelines/html/1/adult-and-adolescent-arv/367/overview. †isoniazid is formulated as 100-mg and 300-mg tablets.





^{††}Rifapentine is formulated as 150-mg tablets in blister packs that should be kept sealed until use.

[¶]Intermittent regimens must be provided via directly observed therapy (i.e., a health care worker observes the ingestion of medication). §Rifampin (rifampicin) is formulated as 150-mg and 300-mg capsules.

^{||}The American Academy of Pediatrics acknowledges that some experts use rifampin at 20–30 mg/kg for the daily regimen when prescribing for infants and toddlers (**Source**: American Academy of Pediatrics. Tuberculosis. In: Kimberlin DW, Brady MT, Jackson MA, Long SS, eds. Red Book: 2018 Report of the Committee on Infectious Diseases. 31st ed. Itasca, IL: American Academy of Pediatrics; 2018:829–53). #The American Academy of Pediatrics recommends an INH dosage of 10–15 mg/kg for the daily regimen and 20–30 mg/kg for the twice weekly regimen.