

DATE: February 12, 2013  
TO: Medical Providers  
FROM: Karen Furst, MD, Health Officer  
Cora Hoover, MD, Assistant Health Officer

*Please distribute to all  
providers & other relevant  
staff in your office.*

## **Health Advisory: Isoniazid (INH) and Doxycycline/Tetracycline Shortages**

### **Isoniazid (INH) Shortage**

A shortage in isoniazid (INH) began in December 2012; it involves INH in both 300 mg and 100 mg tablets. It is thought to be due to a shortage of the active ingredient in INH. In the U.S., INH tablets are supplied by Teva, VersaPharm, and Sandoz; all suppliers have been affected. Teva has started to make available a limited supply of the 300 mg tablets, but due to the backlog of orders, it is expected that shortages may continue for a few months. For updates on the shortage see FDA Drug Shortage Website:

<http://www.fda.gov/Drugs/DrugSafety/DrugShortages/default.htm>.

### **Active or Suspected TB Disease**

- Prioritize INH use for treatment of active or suspected TB disease over latent TB treatment.
- If INH is not available, please consult with San Joaquin County TB Control (209-468-3828) to select alternative, effective treatment regimens for patients with suspected or confirmed active TB disease. Alternative regimens should be selected in accordance with national treatment guidelines. See CDC Treatment Guidelines at:  
<http://www.cdc.gov/mmwr/pdf/rr/rr5211.pdf>.

### **Latent TB Infection (LTBI)**

- If supply is limited, use a regimen with lower quantities of INH such as INH x 6 months; or a regimen that does not use INH, such as rifampin x 4 months. (AAP recommends 6 months of rifampin for children). See CDC LTBI Treatment Guidelines:  
<http://www.cdc.gov/mmwr/pdf/rr/rr4906.pdf>.
- Prioritize INH for LTBI treatment of patients who have higher risk for progression to TB disease (e.g., HIV-infected, recent converters, contacts to active cases, young children, immune-compromised, diabetes, kidney failure, etc.).

- If necessary patients may be switched from INH to Rifampin during LTBI treatment:

<b>LTBI Treatment: Switching from INH to Rifampin</b>	
<b>Amount of INH Completed</b>	<b>Months of Rifampin needed</b>
3 months of INH or less	Give 4 months of Rifampin
4 months of INH	Give 3 months of Rifampin
5 months of INH	Give 2 months of Rifampin
6 months or more of INH	No further treatment

For treatment consultation, please call San Joaquin County TB Control (209) 468-3828.

-----

### **Doxycycline/Tetracycline Shortages**

The Food and Drug Administration (FDA) reported a shortage of doxycycline on January 18, 2013. Doxycycline is a recommended therapy for some sexually transmitted diseases (STD) including chlamydia and gonorrhea as well as pelvic inflammatory disease. It is also an alternative therapy for syphilis in patients with a penicillin allergy. Doxycycline tablets/capsules are currently available in limited supplies. A shortage of tetracycline has also been reported. Tetracycline is an alternative to doxycycline for the treatment of syphilis in penicillin-allergic patients. For additional information about the availability of doxycycline and tetracycline, visit the FDA Drug Shortage Website:

<http://www.fda.gov/Drugs/DrugSafety/DrugShortages/default.htm>.

Non-doxycycline treatment regimens for sexually transmitted diseases are listed below. See also the 2010 STD Treatment Guidelines: <http://www.cdc.gov/std/treatment/2010/default.htm>.

- **Uncomplicated chlamydia infections:** 1 gram Azithromycin PO
- **Uncomplicated gonorrhea infections:** 250 mg Ceftriaxone IM plus 1 gram Azithromycin PO
- **Pelvic Inflammatory Disease (PID)** (outpatient treatment): Ceftriaxone 250 mg IM PLUS Clindamycin 450 mg orally QID for 14 days WITH OR WITHOUT Metronidazole 500 mg orally BID for 14 days
- **Primary, secondary, or early latent syphilis:** Benzathine penicillin G 2.4 million units IM x 1, OR if patient is penicillin-allergic, tetracycline 500 mg PO QID x 14 days
- **Late latent syphilis or latent syphilis of unknown duration:** Benzathine Penicillin G 2.4 million units IM weekly x 3 doses, OR if patient is penicillin-allergic tetracycline 500 mg PO QID x 28 days

San Joaquin County Public Health Services STD Clinic is able to administer Benzathine Penicillin G injections for syphilis, and currently has an adequate supply of doxycycline. If you would like to refer your patient to PHS STD Clinic please call (209) 468-3830. For medical consultation concerning STDs, please call (209) 468-3845.