

**Mira, NRC, Quelapio, MID, Orillaza, RB, Macalintal, LE, Belen, VA, de las Alas, MG, Nery, JAB, Mangubat, NV and Tupasi, TE, "Improved treatment adherence through community-based DOTS-Plus," *The International Journal of Tuberculosis and Lung Disease*, Vol. 10, No. 11, (November) 2006, Supplement 1: S207.**

**Background:** A clinic- based DOTS- Plus for the management of multidrug-resistant TB (MDR-TB) patients in Makati, Philippines has been approved in 2000 by the Green Light Committee (GLC).

**Objective:** To determine the impact on treatment adherence and outcome of MDR-TB patients on community- based care.

**Materials and methods:** This is a descriptive study of initiating a community based- TB care program among MDR-TB patients seen at the Makati Medical Center (MMC) DOTS Clinic from September 2003 to December 2005.

**Results:** After appropriate coordination with the National Tuberculosis Program (NTP), local government health units implementing DOTS, faith- based organizations and non-government organizations (NGOs) providing community-based health services, a series of training courses for various health care workers was undertaken. Seventy-two of 359 MDR-TB patients enrolled from June 2001 to September 2005 were endorsed to community treatment partners (CTPs). Monthly visits and weekly phone calls were done by a supervisor. A significant increase in the cure rate and significant decline in the default rate among patients endorsed to CTPs were observed.

**Conclusion:** Community- based implementation of DOTS-Plus is feasible in Metro Manila, Philippines. Continued close monitoring is essential in assuring that DOTS-Plus services are properly implemented by CTPs. A significant improvement in treatment adherence among MDR-TB patients underscored the benefit of community- based DOTS-Plus.