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Tuberculosis

Drug resistance in Canada

1999

Reported susceptibility results of the Canadian Tuberculosis Laboratory Surveillance System

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INTRODUCTION

Tuberculosis Prevention and Control at the Centre for Infectious Disease Prevention and Control, Health Canada, in collaboration with the Canadian Tuberculosis Laboratory Technical Network and participating laboratories (representing all provinces and territories) in the Canadian Tuberculosis Laboratory Surveillance System (CTBLSS) (Appendix 1), established a laboratory-based national surveillance system in 1998 to monitor tuberculosis (TB) drug resistance patterns in Canada.

Laboratories report their results on anti-tuberculosis drug susceptibility testing to Tuberculosis Prevention and Control for every patient for whom a specimen or an isolate has been received for each calendar year. Tuberculosis Prevention and Control subsequently conduct analyses to produce an annual report. This report presents 1999 and adjusted 1998 (to reflect late reporting) drug susceptibility data for TB isolates across Canada as of April 10, 2000.

METHODOLOGY

A computerized database containing drug susceptibility test results of *Mycobacterium tuberculosis* (MTB) and MTB complex (MTBC) isolates is maintained at Tuberculosis Prevention and Control at the Centre for Infectious Disease Prevention and Control. Data are collected either through manual completion and mailing of a standard reporting form (Appendix 2) or by electronic transmission. Information collected includes sex, year of birth, province/territory from which the report originates, province/territory from which the specimen originates and susceptibility results. Every effort is made to eliminate duplicate specimens; only the most recent susceptibility results for a given patient in the current reporting year are included for analysis.

Manitoba, Ontario and Newfoundland identify the species and test all isolates for drug resistance in their respective provinces. Some provinces identify the species and test their own isolates and those of other provinces/territories (British Columbia: British Columbia and Yukon Territory isolates; Alberta: Alberta, Northwest Territories and some Nunavut isolates; Quebec: Quebec, New Brunswick, Northwest Territories and Nunavut isolates; Nova Scotia: Nova Scotia and Prince Edward Island isolates). Saskatchewan tests for drug resistance on all MTBC isolates; other provinces and territories report results at the species level, excluding *M. bovis* BCG.

Routine susceptibility testing of MTB or MTBC to first-line anti-tuberculosis drugs is generally performed using the radiometric proportion method (Bactec®). Table A lists the first-line anti-tuberculosis drugs and the concentrations in mg/L used by the participating laboratories. Results of susceptibility testing for second-line anti-tuberculosis drugs are not included in this report.

As noted in Table A, the number and specific first-line anti-tuberculosis drugs for which routine susceptibility testing is carried out differ among the provinces and territories. Accordingly, the number of isolates included in the descriptive analyses that were carried out vary. Analyses were performed using SAS 6.12.

Table A: Concentrations for routine testing of first-line anti-tuberculosis drugs		
Anti-tuberculosis drugs	**mg/L**	**Comments**
Isoniazid (INH)	0.1	
Rifampin (RMP)	2.0	
Ethambutol (EMB)	2.5	British Columbia uses a concentration of 4.0 mg/L.
Streptomycin (SM)	2.0	Routine testing is not performed for isolates from Quebec, Nova Scotia, New Brunswick, Prince Edward Island and for Nunavut isolates tested in Quebec.
Pyrazinamide (PZA)	100.0	Routine testing is not performed for isolates from British Columbia, Saskatchewan and the Yukon Territory.

RESULTS

In 1999, participating laboratories across Canada reported drug susceptibility results for 1,434 isolates of MTBC. Twenty-three *M. bovis* isolates were reported: 20 isolates of *M. bovis* BCG and 3 isolates of *M. bovis* other than BCG. Only the 3 (0.2%) *M. bovis* other than BCG isolates (one each from Quebec, Ontario and British Columbia) are included in the analyses, leaving a total of 1,414 isolates. The majority of isolates originated from Ontario, Quebec, British Columbia, Alberta and Manitoba. The Yukon Territory reported no isolates for 1999.

Of the 1,414 isolates in 1999 included for analysis, 173 (12.2%) were resistant to one or more first-line anti-tuberculosis drug(s). Resistance to INH was the most common type of drug resistance (8.9%). A total of 17 isolates (1.2%) were multi-drug resistant tuberculosis (MDR-TB) strains (defined as resistance to at least INH and RMP); of which eight isolates demonstrated resistance to four or five first-line anti-tuberculosis drugs tested. These isolates were reported from Ontario, Quebec, Manitoba and British Columbia. In addition, Alberta and Saskatchewan reported isolates with other patterns of multi-resistance. Nova Scotia's one reported drug resistant isolate was resistant to INH only. Five provinces and territories (Nunavut, Northwest Territories, Newfoundland, Prince Edward Island and New Brunswick) reported that all their isolates were susceptibile to all the first-line anti-tuberculosis drugs that were tested.

Demographic information on the individual patients from whom the isolates originated was limited in this laboratory-based surveillance system. Of the 1,281 isolates for which the year of birth was known, 57% reported a year of birth between 1941 and 1980. Among the 141 drug resistant isolates for which year of birth was known, 69% reported a year of birth between 1941 and 1980. Males accounted for 56% of all the isolates and 65% of the drug resistant isolates for which sex was reported.

DISCUSSION

The number of reported TB isolates in 1999 decreased by 3.4% from the previous year (1,464 to 1,414 isolates). While the percentage of isolates demonstrating any type of drug resistance increased from 11.9% in 1998 to 12.2% in 1999, the proportion of isolates classified as MDR-TB was identical for both years (1.2%). Quebec accounted for most of the rise in INH monoresistance; however, routine testing for SM was stopped in this province in January of 1999. Therefore, results previously classified as resistance to INH+SM would now be recorded as INH monoresistance and may account for this increase.

Over 90% of the reported laboratory TB isolates in Canada in 1999 originated from five provinces. The two largest provinces (Ontario and Quebec) consistently reported the majority of isolates and MDR-TB in the two years of data collection. Since the initiation of this laboratory-based surveillance system that began January 1, 1998, Saskatchewan, the Atlantic Provinces and the Territories have not reported any MDR-TB cases.

The results observed to date in this surveillance system are consistent with international data. In the latest report of the global TB drug resistance surveillance project jointly conducted by the World Health Organization (WHO) and the International Union Against Tuberculosis and Lung Disease (IUATLD), the median prevalence of overall TB drug resistance among the participating countries was 11.1% (as compared to 12.2% for Canada) and the median prevalence of MDR-TB was 1.7%[1] (as compared to 1.2% for Canada).

Figure 1
Reported TB drug resistance in Canada by province/territory – 1999 (n = 1,414)

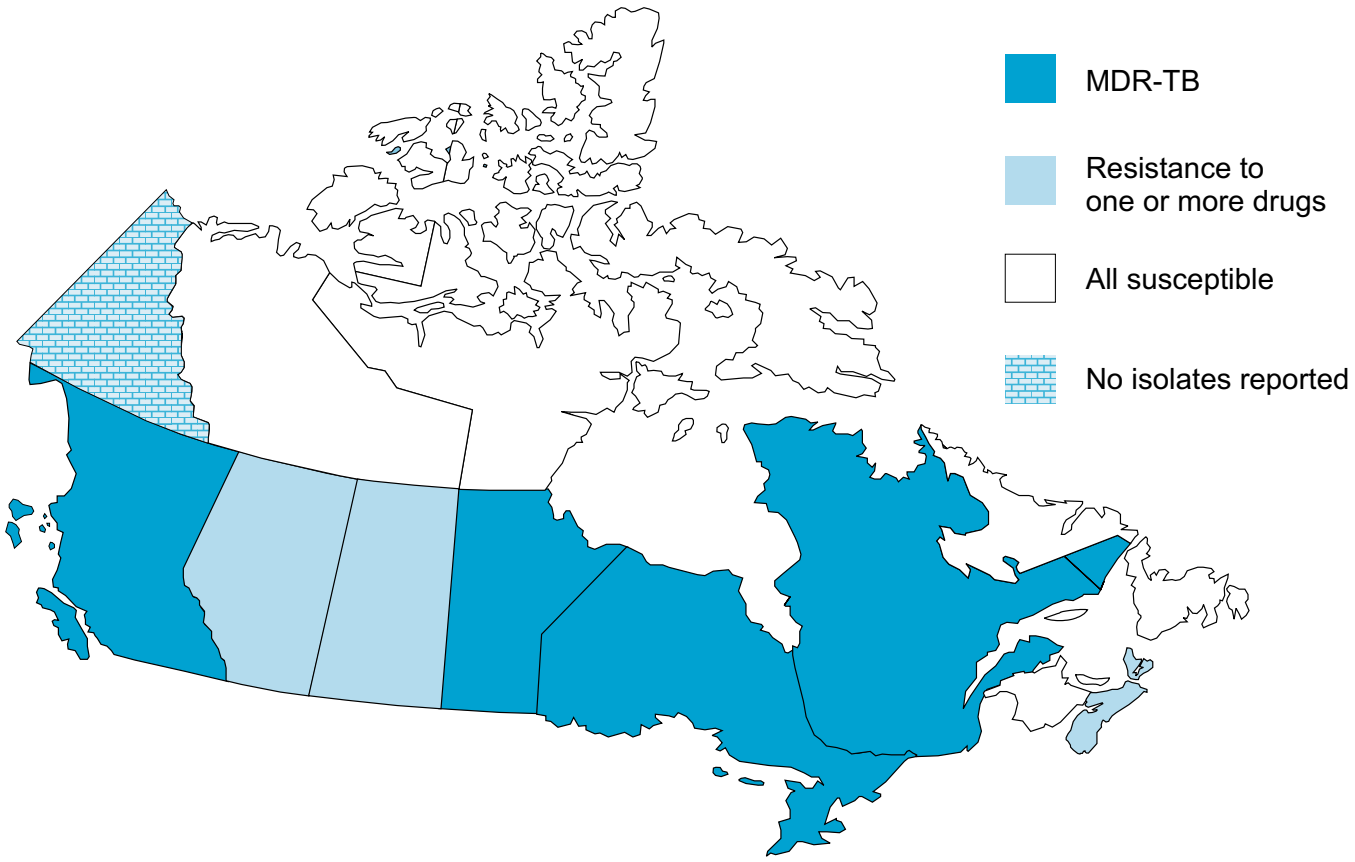


Figure 2
Reported MTB isolates in Canada by province/territory – 1999 (n = 1,414)

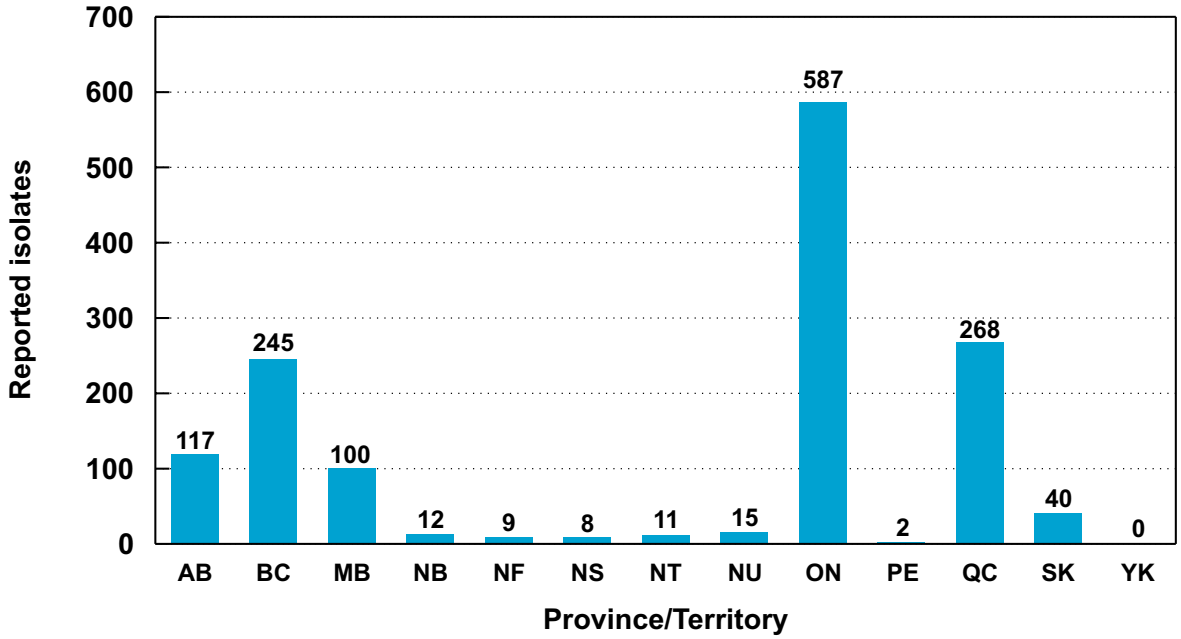


Figure 3
Overall pattern of reported TB drug resistance in Canada – 1999 (n = 171)

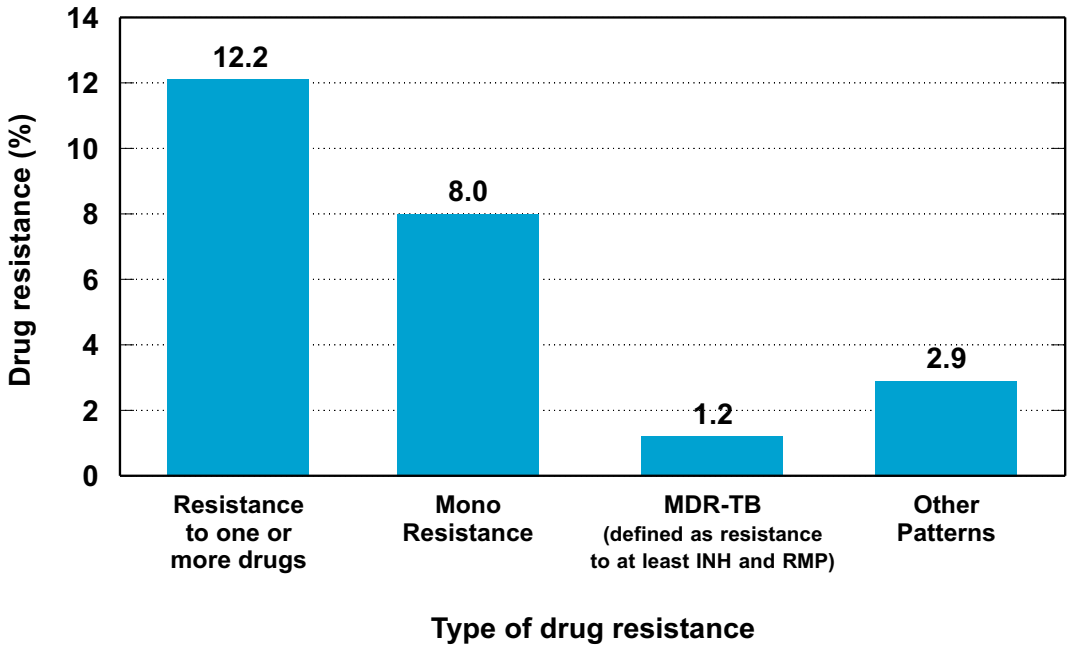
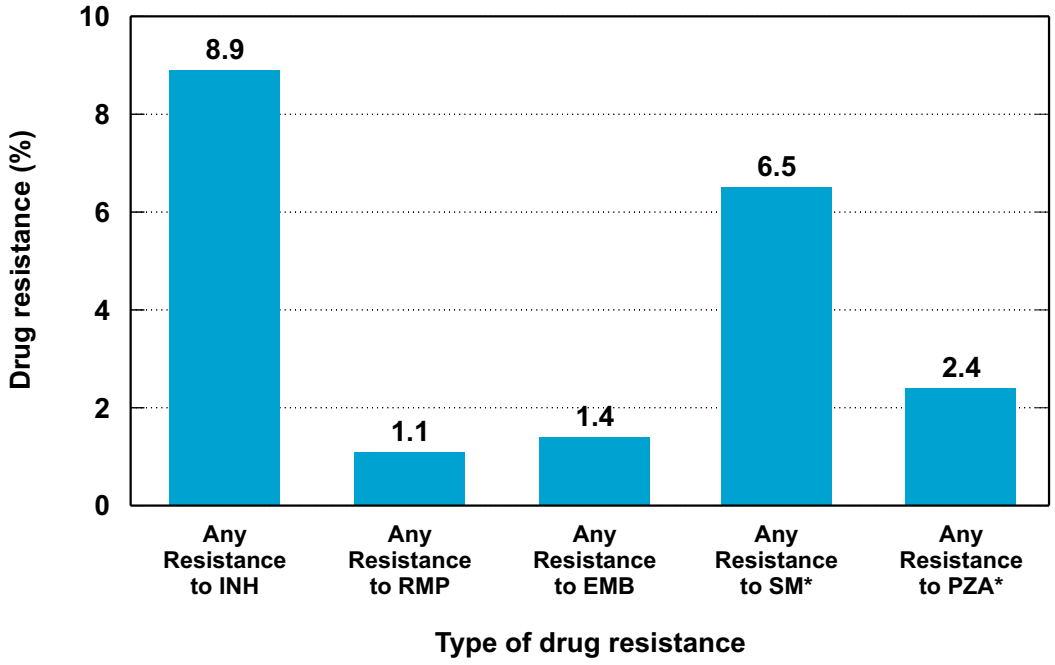


Figure 4
Reported TB drug resistance in Canada by type of drug – 1999 (n = 171)



* SM and PZA are not part of routine first-line drug testing in some provinces/territories.

Figure 5
Reported TB drug resistance in Canada by sex and year of birth – 1999 (n = 171)

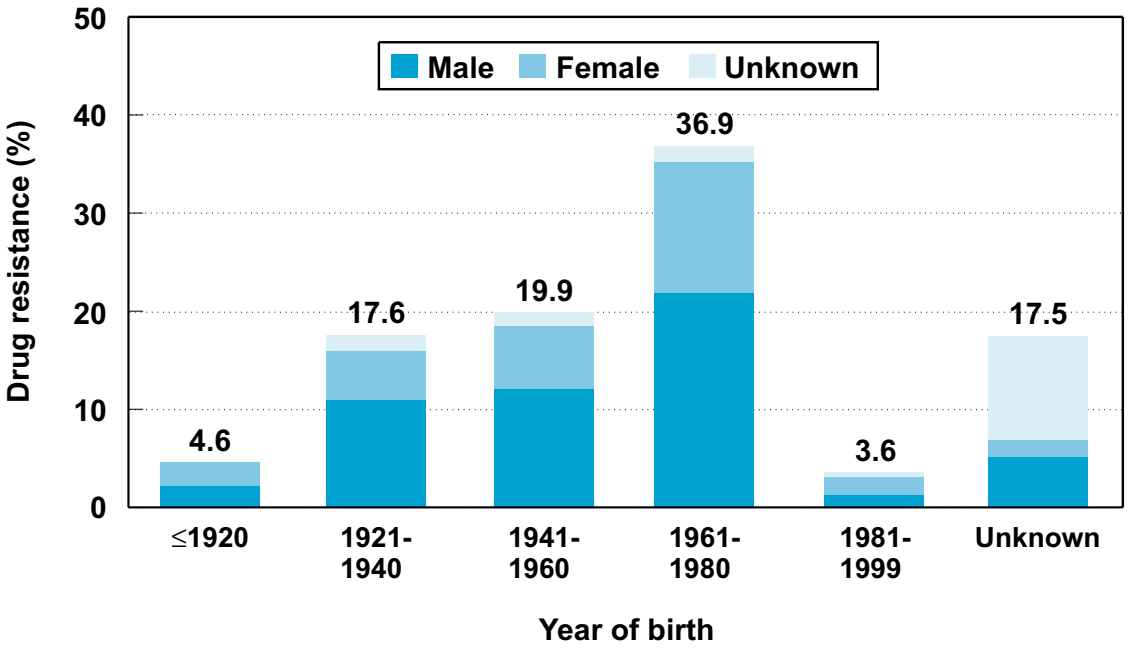


Table 1. Overall pattern of reported TB drug resistance in Canada – 1998-1999

	1998 Total (%)	1999 Total (%)
Total number of isolates tested	**1,464 (100.0)**	**1,414 (100.0)**
Any resistance to INH	124 (8.5)	126 (8.9)
Any resistance to RMP	19 (1.3)	19 (1.1)
Any resistance to EMB	22 (1.5)	20 (1.4)
Any resistance to SM**	83 (5.7)	72 (6.5)
Any resistance to PZA**	24 (2.0)	27 (2.4)***
Resistance to one or more drugs	174 (11.9)	171 (12.1)
Monoresistance**	116 (7.9)	113 (8.0)***
MDR-TB*	18 (1.2)	17 (1.2)
Other patterns	40 (2.7)	41 (2.9)

* MDR-TB is defined as resistance to at least INH and RMP.

** Because SM and PZA are not part of the routine first-line drugs in some provinces and territories, denominators for any resistance to these drugs have been modified to reflect this (1998: SM n = 1,453 and PZA n = 1,177) (1999: SM n = 1,110 and PZA n = 1,130).

*** Includes 2 *M. bovis* isolates (1999)

Table 2. Reported MTB isolates by "reporting" and "originating" province/territory, Canada – 1999

Reporting Province	CANADA	Originating Province/Territory												
		AB	BC	MB	NB	NF	NS	NT	NU	ON	PE	QC	SK	YK
Number of isolates	1,414	117	245	100	12	9	8	11	15	587	2	268	40	-
ALTA	131	117	1	-	-	-	-	11	2	-	-	-	-	-
BC	244	-	244	-	-	-	-	-		-	-	-	-	-
MAN	100	-	-	100	-	-	-	-		-	-	-	-	-
NFLD	9	-	-	-	-	9	-	-		-	-	-	-	-
NS	10	-	-	-	-	-	8	-		-	2	-	-	-
ONT	586	-	-	-	-	-	-	-		586	-	-	-	-
QC	294	-	-	-	12	-	-	-	13	1	-	268	-	-
SASK	40	-	-	-	-	-	-	-		-	-	-	40	-

Table 3. Reported MDR-TB* isolates by province/territory, Canada – 1999

	CANADA	Originating Province/Territory												
		AB	BC	MB	NB	NF	NS	NT	NU	ON	PE	QC	SK	YK
Total number of isolates tested	**1,414**	**117**	**245**	**100**	**12**	**9**	**8**	**11**	**15**	**587**	**2**	**268**	**40**	**-**
Total number of MDR-TB* isolates	17	-	1	2	-	-	-	-	-	12	-	2	-	-
INH & RMP	4	-	-	1	-	-	-	-	-	2	-	1	-	-
INH, RMP & EMB	1	-	-	-	-	-	-	-	-	1	-	-	-	-
INH, RMP & SM	3	-	-	-	-	-	-	-	-	3	-	-	-	-
INH, RMP & PZA	1	-	-	-	-	-	-	-	-	1	-	-	-	-
INH, RMP, EMB & SM	1	-	1	-	-	-	-	-	-	-	-	-	-	
INH, RMP, SM & PZA	1	-	-	1	-	-	-	-	-	-	-	-	-	
INH, RMP, EMB & PZA	1	-	-	-	-	-	-	-	-	-	-	1	-	-
INH, RMP, EMB, SM & PZA	5	-	-	-	-	-	-	-	-	5	-	-	-	-

* MDR-TB is defined as resistance to at least INH and RMP.

Table 4. Reported TB drug resistance by sex and year of birth, Canada – 1999

	Number of isolates		Any type of resistance		MDR-TB*	
	No.	%	No.	%	No.	%
Sex						
Male	733	51.8	95	6.7	5	0.3
Female	573	40.5	52	3.7	6	0.4
Unknown	108	7.6	24	1.7	6	0.4
Total	**1,414**	**100.0**	**171**	**12.1**	**17**	**1.2**
Year of Birth						
1920	152	10.7	8	0.6	0	0.0
1921-1940	343	24.3	30	2.1	4	0.3
1941-1960	327	23.1	34	2.4	1	0.1
1961-1980	402	28.4	63	4.5	8	0.6
1981-1999	57	4.0	6	0.4	0	0.0
Unknown	133	9.4	30	2.1	4	0.3
Total	**1,414**	**100.0**	**171**	**12.1**	**17**	**1.2**

* MDR-TB is defined as resistance to at least INH and RMP.

Table 5. Reported results for routine drug susceptibility testing of MTB isolates to first-line anti-tuberculosis drugs, Alberta – 1998-1999

	1998 Total (%)	1999 Total (%)
Total number of isolates tested for INH, RMP, EMB, SM and PZA	**119 (100.0)**	**117 (100.0)**
Isolates susceptible	**107 (89.9)**	**110 (94.0)**
Isolates resistant to one or more drugs	**12 (10.1)**	**7 (6.0)**
Monoresistance	**9 (7.6)**	**6 (5.1)**
INH	4 (3.4)	2 (1.7)
SM	5 (4.2)	4 (3.4)
MDR-TB*	**1 (0.8)**	**0 (0.0)**
INH, RMP, EMB, SM & PZA	1 (0.8)	0 (0.0)
Other Patterns	**2 (1.7)**	**1 (0.9)**
INH & SM	1 (0.8)	1 (0.9)
INH, SM & PZA	1 (0.8)	0 (0.0)

* MDR-TB is defined as resistance to at least INH and RMP.

Table 6. Reported results for routine drug susceptibility testing of MTB isolates to first-line anti-tuberculosis drugs, British Columbia – 1998-1999

	1998 Total (%)	1999 Total (%)
Total number of isolates tested for INH, RMP, EMB and SM**	**237 (100.0)**	**245 (100.0)**
Isolates susceptible***	**212 (89.5)**	**225 (91.8)**
Isolates resistant to one or more drugs	**25 (10.5)**	**20 (8.2)**
Monoresistance	**17 (7.2)**	**15 (6.1)**
INH	14 (5.9)	11 (4.5)
SM	2 (0.8)	2 (0.8)
RMP	1 (0.4)	1 (0.4)
EMB	- (0.0)	1 (0.4)
MDR-TB*	**2 (0.8)**	**1 (0.4)**
INH, RMP & SM	1 (0.4)	- (0.0)
INH, RMP, EMB & SM	1 (0.4)	1 (0.4)
Other Patterns	**6 (2.5)**	**4 (1.6)**
INH & SM	5 (2.1)	2 (0.8)
INH & EMB	1 (0.4)	1 (0.4)
INH, SM & EMB	- (0.0)	1 (0.4)

* MDR-TB is defined as resistance to at least INH and RMP.

** Routine testing for PZA not conducted in British Columbia.

*** Includes 1 *M. bovis* isolate (1999).

Table 7. Reported results for routine drug susceptibility testing of MTB isolates to first-line anti-tuberculosis drugs, Manitoba – 1998-1999

	1998 Total (%)	1999 Total (%)
Total number of isolates tested for INH, RMP, EMB, SM and PZA	**106 (100.0)**	**100 (100.0)**
Isolates susceptible	**98 (92.5)**	**89 (89.0)**
Isolates resistant to one or more drugs	**8 (7.5)**	**11 (11.0)**
Monoresistance	**4 (3.8)**	**6 (6.0)**
INH	2 (1.9)	3 (3.0)
SM	2 (1.9)	3 (3.0)
MDR-TB*	**2 (1.9)**	**2 (2.0)**
INH & RMP	- (0.0)	1 (1.0)
INH, RMP & EMB	1 (0.9)	- (0.0)
INH, RMP, SM & PZA	- (0.0)	1 (1.0)
INH, RMP, EMB, SM & PZA	1 (0.9)	- (0.0)
Other Patterns	**2 (1.9)**	**3 (3.0)**
INH & SM	2 (1.9)	1 (1.0)
INH, SM & EMB	- (0.0)	1 (1.0)
INH, SM & PZA	- (0.0)	1 (1.0)

* MDR-TB is defined as resistance to at least INH and RMP.

Table 8. Reported results for routine drug susceptibility testing of MTB isolates to first-line anti-tuberculosis drugs, New Brunswick – 1998-1999

	1998 Total (%)	1999 Total (%)
Total number of isolates tested for INH, RMP, EMB and PZA*	**9 (100.0)**	**12 (100.0)**
Isolates susceptible	**8 (88.9)**	**12 (100.0)**
Isolates resistant to one or more drugs	**1 (1.1)**	**- (0.0)**
Monoresistance	**1 (1.1)**	**- (0.0)**
INH	1 (1.1)	- (0.0)

* Routine testing for SM not conducted in New Brunswick.

Table 9. Reported results for routine drug susceptibility testing of MTB isolates to first-line anti-tuberculosis drugs, Newfoundland – 1998-1999

	1998 Total (%)	1999 Total (%)
Total number of isolates tested for INH, RMP, EMB, SM and PZA	**8 (100.0)**	**9 (100.0)**
Isolates susceptible	**8 (100.0)**	**9 (100.0)**

Table 10. Reported results for routine drug susceptibility testing of MTB isolates to first-line anti-tuberculosis drugs, Northwest Territories – 1998-1999

	1998 Total (%)	1999 Total (%)
Total number of isolates tested for INH, RMP, EMB, SM and PZA	**27 (100.0)**	**11 (100.0)**
Isolates susceptible	**27 (100.0)**	**11 (100.0)**

Table 11. Reported results for routine drug susceptibility testing of MTB isolates to first-line anti-tuberculosis drugs, Nova Scotia – 1998-1999

	1998 Total (%)	1999 Total (%)
Total number of isolates tested for INH, RMP, EMB and PZA*	**9 (100.0)**	**8 (100.0)**
Isolates susceptible	**8 (88.9)**	**7 (87.5)**
Isolates resistant to one or more drugs	**1 (11.1)**	**1 (12.5)**
Monoresistance	**1 (11.1)**	**1 (12.5)**
INH	1 (11.1)	1 (12.5)

* Routine testing for SM not conducted in Nova Scotia.

Table 12. Reported results for routine drug susceptibility testing of MTB isolates to first-line anti-tuberculosis drugs, Nunavut* – 1998-1999

	1998 Total (%)	1999 Total (%)
Total number of isolates tested for INH, RMP, EMB, PZA and SM**	**N/A**	**15 (100.0)**
Isolates susceptible	**N/A**	**15 (100.0)**

* Note: Nunavut began reporting in 1999.

** Routine testing for SM not conducted for Nunavut when tested by Quebec. (n=13 for 1999)

Table 13. Reported results for routine drug susceptibility testing of MTB isolates to first-line anti-tuberculosis drugs, Ontario – 1998-1999

	1998 Total (%)	1999 Total (%)
Total number of isolates tested for INH, RMP, EMB, SM and PZA	**632 (100.0)**	**587 (100.0)**
Isolates susceptible	**540 (85.4)**	**488 (83.1)**
Isolates resistant to one or more drugs	**92 (14.6)**	**99 (16.9)**
Monoresistance	**55 (8.7)**	**57 (9.7)**
INH	34 (5.4)	34 (5.8)
SM	11 (1.7)	19 (3.2)
PZA**	6 (0.9)	4 (0.7)
EMB	4 (0.6)	- (0.0)
MDR-TB*	**11 (1.7)**	**12 (2.0)**
INH & RMP	2 (0.3)	2 (0.3)
INH, RMP & SM	1 (0.2)	3 (0.5)
INH, RMP & EMB	- (0.0)	1 (0.2)
INH, RMP & PZA	- (0.0)	1 (0.2)
INH, RMP, EMB & SM	2 (0.3)	- (0.0)
INH, RMP, EMB, SM & PZA	6 (0.9)	5 (0.9)
Other Patterns	**26 (4.1)**	**30 (5.1)**
INH & EMB	2 (0.3)	4 (0.7)
INH & SM	20 (3.2)	20 (3.4)
INH, SM & EMB	2 (0.3)	4 (0.7)
INH, SM & PZA	2 (0.3)	2 (0.3)

* MDR-TB is defined as resistance to at least INH and RMP.

** Includes 1 *M. bovis* isolate (1999).

Table 14. Reported results for routine drug susceptibility testing of MTB isolates to first-line anti-tuberculosis drugs, Prince Edward Island – 1998-1999

	1998 Total (%)	1999 Total (%)
Total number of isolates tested for INH, RMP, EMB, and PZA*	**2 (100.0)**	**2 (100.0)**
Isolates susceptible	**2 (100.0)**	**2 (100.0)**

* Routine testing for SM not conducted in Prince Edward Island.

Table 15. Reported results for routine drug susceptibility testing of MTB isolates to first-line anti-tuberculosis drugs, Québec – 1998-1999

	1998 Total (%)	1999 Total (%)
Total number of isolates tested for INH, RMP, EMB and PZA**	**264 (100.0)**	**268 (100.0)**
Isolates susceptible	**231 (87.5)**	**236 (88.1)**
Isolates resistant to one or more drugs	**33 (12.5)**	**32 (11.9)**
Monoresistance	**28 (10.6)**	**28 (10.4)**
INH	9 (3.4)	17 (6.3)
RMP	- (0.0)	1 (0.4)
SM	13 (4.9)	NT**
PZA***	6 (2.3)	10 (3.7)
MDR-TB*	**2 (0.8)**	**2 (0.7)**
INH & RMP	- (0.0)	1 (0.4)
INH, RMP & SM	1 (0.4)	NT**
INH, RMP & EMB	1 (0.4)	- (0.0)
INH, RMP, EMB & PZA	- (0.0)	1 (0.4)
Other Patterns	**3 (1.1)**	**2 (0.7)**
INH & SM	2 (0.8)	NT**
INH & PZA	1 (0.4)	2 (0.7)

* MDR-TB is defined as resistance to at least INH and RMP.

** Routine testing for SM not conducted in Québec effective January 1, 1999. (NT = not tested)

*** Includes 1 *M. bovis* isolate (1999).

Table 16. Reported results for routine drug susceptibility testing of MTB isolates to first-line anti-tuberculosis drugs, Saskatchewan – 1998-1999

	1998 Total (%)	1999 Total (%)
Total number of isolates tested for INH, RMP, EMB and SM*	**49 (100.0)**	**40 (100.0)**
Isolates susceptible	**47 (95.9)**	**39 (97.5)**
Isolates resistant to one or more drugs	**2 (4.1)**	**1 (2.5)**
Monoresistance	**1 (2.0)**	**- (0.0)**
INH	1 (2.0)	- (0.0)
Other patterns	**1 (2.0)**	**1 (2.5)**
INH & SM	1 (2.0)	1 (2.5)

* Routine testing for PZA not conducted in Saskatchewan.

Table 17. Reported results for routine drug susceptibility testing of MTB isolates to first-line anti-tuberculosis drugs, Yukon Territory – 1998-1999

	1998 Total (%)	1999 Total (%)
Total number of isolates tested for INH, RMP, EMB and SM*	**1 (100.0)**	**- (0.0)**
Isolates susceptible	**1 (100.0)**	**- (0.0)**

* Routine testing for PZA not conducted in Yukon Territory.

• No isolates were tested for Yukon Territory in 1999.

LIMITATIONS

Susceptibility testing for first-line anti-tuberculosis drugs is not uniform across the country. Therefore, there are limitations in interpreting the data, particularly the percentage of isolates that are resistant to SM and PZA.

More epidemiologic information on the TB cases from which the isolates were submitted would be desirable to critically examine drug resistance patterns in Canada. Demographic information is sparse; only sex and year of birth are routinely reported to this surveillance system. As well, no differentiation can be made between primary and secondary/acquired drug resistance from the data in the system. The participating laboratories attempted to collect data on the country of origin in 1999. However, because of the difficulties in doing so, this variable has subsequently been dropped from the surveillance data set.

CONCLUSIONS

With growing worldwide concern regarding TB drug resistance, this laboratory-based surveillance system is vital in providing the necessary data in a timely fashion to monitor trends in TB drug resistance in Canada. The surveillance data collected to date indicate that the prevalence of TB drug resistance in this country is similar to that in the overall global situation. However, with data collected only for two years, any discussion of "trends" is premature at the present time. Several more years of collected data will be necessary in order to examine the unfolding pattern of TB drug resistance in Canada.

REFERENCE

1. The WHO/IUATLD Global Project on Anti-tuberculosis Drug Resistance Surveillance. Anti-tuberculosis drug resistance in the world; Report No. 2. (WHO/CDS/TB/2000.278). Geneva: World Health Organization, 2000.

Appendix 1

Participating Laboratories of the Canadian Tuberculosis Laboratory Surveillance System (CTBLSS)

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Appendix 2

Health Canada / Santé Canada

Serial No. - N° de série

The Canadian Tuberculosis Laboratory Network Surveillance System
M. TUBERCULOSIS COMPLEX ANTIMICROBIAL SUSCEPTIBILITY REPORTING FORM

Système de surveillance du Réseau canadien des laboratoires de tuberculose
RAPPORT SUR LA SENSIBILITÉ DES SOUCHES DU COMPLEXE M. TUBERCULOSIS AUX ANTIMICROBIENS

FOR INTERNAL USE ONLY - POUR USAGE INTERNE SEULEMENT
Date Rec'd at LCDC: Date de réception au LLCM: Y/A M D/J
LCDC Number: Numéro du LLCM:

Unique Source Laboratory ID No. - Identificateur unique du laboratoire déclarant:

Date specimen / culture received at laboratory: Date de réception échantillon / culture au laboratoire: Y/A M D/J

Specie: Espèce :
- ☐ M. tuberculosis
- ☐ M. bovis
- ☐ M. BCG bovis
- ☐ M. africanum
- ☐ M. microti
- ☐ MTB Complex (species unknown) / Complexe MTB (espèce inconnu)

Specimen: Prélèvement :
- ☐ Sputum / Expectorations
- ☐ Bronchial Washings / Liquide de lavage bronchique
- ☐ GI Washings / Liquide de lavage gastrique
- ☐ Lymph Node Biopsy / Biopsie ganglionnaire
- ☐ Urine
- ☐ Cerebrospinal Fluid / Liquide céphalo-rachidien
- ☐ Pleural Biopsy / Biopsie pleurale
- ☐ Blood / Sang
- ☐ Tissue Biopsy (Specify) / Biopsie tissulaire (Préciser) _____
- ☐ Other (Specify) / Autre (Préciser) _____

Have susceptibility test results been previously reported for this patient? - Des résultats d'antibiogramme ont-ils déjà été fournis pour ce patient?

☐ No / Non ☐ Yes / Oui → What is the previous Unique Source Laboratory ID No.? / Identificateur antérieur?

→ What is the previous Form No.? (If known) / N° de formulaire antérieur? (Si connu)

Note: Only DRUG TESTING RESULTS OF ONE ISOLATE are to be reported. No subsequent drug testing results for the same patient are to be reported unless the sensitivity pattern changes.

Note: Ne fournir que les RÉSULTATS POUR UNE SEULE SOUCHE par patient à moins d'un changement du profil de sensibilité.

1. Province / territory from which this report originates: / Province / territoire qui soumet ce rapport : ☐☐ (see code list / voir liste de codes)
2. Province / territory from which specimen originated: / Province / territoire d'où provient l'échantillon : ☐☐ (see code list / voir liste de codes)
3. Patient's date of birth: / Date de naissance du patient : Y/A M D/J (CCYY/MM/DD) (SSAA/MM/JJ) ☐ Unknown / Inconnu
4. Patient's gender: / Sexe du patient : ☐ Male / Masculin ☐ Female / Féminin ☐ Unknown / Inconnu

PROV / TERR CODES PROV / TERR

10 = NFLD / TN	46 = MAN
11 = PEI / IPÉ	47 = SASK
12 = NS / NÉ	48 = ALTA / ALB
13 = NB	59 = BC / BC
24 = QUÉ / Qc	60 = YUK
35 = ONT	61 = NWT / TNO

5. Patient's country of birth: / Pays de naissance du patient : ☐ Canada ☐ Other (specify) / Autre (préciser) _____ ☐ Unknown / Inconnu

6. **LABORATORY RESULTS / RÉSULTATS DE LABORATOIRE**

Antituberculous Drugs / Agents Antituberculeux	Concentration (if different from on file) / Concentration (si autre que spécifiée)	Results (check appropriate box for every drug) / Résultats (cocher la case pertinente pour chaque antibiotique) Sensitive / Sensible	Resistant / Résistant	Other (specify) / Autre (préciser)
SM (Streptomycin) (Streptomycine)	mg / L	☐	☐	
INH (Isonizid) (Isoniazide)	mg / L	☐	☐	
RMP (Rifampin) (Rifampicine)	mg / L	☐	☐	
EMB (Ethambutol) (Éthambutol)	mg / L	☐	☐	
PZA (Pyrazinamide)	mg / L	☐	☐	

2nd line drugs (specify) / Antibiotiques de 2e ligne (préciser)	Concentration	Sensitive / Sensible	Resistant / Résistant	Other (specify) / Autre (préciser)
1.	mg / L	☐	☐	
2.	mg / L	☐	☐	
3.	mg / L	☐	☐	
4.	mg / L	☐	☐	
5.	mg / L	☐	☐	
6.	mg / L	☐	☐	

7. Comments - Commentaires

HC/SC 9061 (04-99) Copy 1 (White) - Reporting Laboratory (retain to access previous Form No. etc.) / Copie 1 (Blanche) - Laboratoire déclarant (conserver pour accès au n° de form. précédent, etc.)
Copy 2 (Yellow) - TB Prevention and Control, LCDC / Copie 2 (Jaune) - Contrôle de la tuberculose, LLCM