

WHO 2026 Treatment Guidelines Summary

1. Drug-Susceptible TB (DS-TB)

The goal is to move eligible patients from the traditional 6-month regimen to a faster 4-month cure.

- **Preferred Adult/Adolescent Regimen (4 Months):**
 - **Phase:** 2 months of **HPZM** (Isoniazid, Rifapentine, Pyrazinamide, Moxifloxacin) followed by 2 months of **HPM**.
 - **Eligibility:** Generally for those 12 years and older with non-severe or severe pulmonary TB.
- **Standard Alternative (6 Months):**
 - 2 months of **HRZE** (Isoniazid, Rifampicin, Pyrazinamide, Ethambutol) + 4 months of **HR**.
- **Pediatric Standard (4 Months):**
 - Children (3 months to 16 years) with **non-severe** TB now receive a 4-month course (2HRZE / 2HR) instead of the old 6-month standard.

2. Drug-Resistant TB (DR-TB)

The WHO now strongly recommends the **BPaLM** regimen as the new standard of care for Multidrug-Resistant (MDR) or Rifampicin-Resistant (RR) TB.

- **The BPaLM Regimen (6 Months):**
 - **Drugs:** Bedaquiline (B), Pretomanid (Pa), Linezolid (L), and Moxifloxacin (M).
 - **Duration:** 6 months total (can be extended to 9 months if recovery is slow).
 - **Impact:** Replaces the previous 18-month regimens and eliminates the need for painful daily injections.
- **For Fluoroquinolone Resistance (BPaL):**
 - If the patient is resistant to Moxifloxacin, the 3-drug **BPaL** regimen is used for 6–9 months.

3. TB with Comorbidities (Module 6 Updates)

A significant 2025/2026 update (Module 6) focuses on managing TB alongside other conditions:

- **TB & Undernutrition:** New mandatory nutritional screening and support. Patients with a low BMI must receive nutritional supplements to prevent treatment failure.
- **TB & HIV:** Immediate initiation of Antiretroviral Therapy (ART) regardless of CD4 count, typically within 2–8 weeks of starting TB treatment.

Key Reference Documents

1. **WHO (2025/2026):** *Consolidated guidelines on tuberculosis. Module 4: Treatment and Care.* 2. **WHO (2025):** *Consolidated guidelines on tuberculosis. Module 6: Tuberculosis comorbidities and health-related risk factors.*
2. **WHO (2024):** *Global Tuberculosis Report 2024* (setting the stage for 2026 targets).