

# Ethambutol + isoniazid

NOT RECOMMENDED AS AN

ESSENTIAL MEDICINE

Section: 6. Anti-infective medicines > 6.2. Antibacterials > 6.2.5. Antituberculosis medicines

Codes ATC: J04AM03

Indication	Tuberculosis    Code ICD11: <a href="#">1B4Z</a>
INN	Ethambutol + isoniazid
Type de médicament	Chemical agent
Type de liste	Liste de base
Formulations	Oral > Solid: 400 mg + 150 mg tablet
Historique des statuts LME	Ajouté pour la première fois en 1997 ( <a href="#">TRS 882</a> ) Retiré en 2019 ( <a href="#">TRS 1021</a> )
Sexe	Tous
Âge	Adolescents et adultes
Équivalence thérapeutique	La recommandation concerne ce médicament spécifique
Renseignements sur le brevet	Patents have expired in most jurisdictions Lire la suite <a href="#">sur les brevets</a> . 
Wikipédia	<a href="#">Ethambutol + isoniazid</a> 
DrugBank	<a href="#">Ethambutol</a>  <a href="#">Isoniazid</a> 

## Résumé des preuves et recommandation du comité d'experts

The Expert Committee recommended the deletion of ethambutol + isoniazid (HE) fixed-dose combination formulation from the core list of the EML, noting the advice of the WHO Global TB Programme that its use is no longer recommended in current WHO guidelines based on evidence that treatment regimens involving this formulation have been associated with greater rates of relapses and death than alternative treatments. The 2010 WHO Treatment of tuberculosis guidelines guidelines for the treatment of tuberculosis (1) recommended that the two-month rifampicin regimen, 2HRZE/6HE, should be phased out, based on evidence that showed it to be associated with more relapses and deaths than the six-month rifampicin regimen, 2HRZE/4HR.

