Role of Treatment Cost on Transmission of Multidrug-Resistant Tuberculosis Into Iran

TO THE EDITOR—Treatment of multidrug-resistant (MDR) tuberculosis requires long-time usage of toxic drugs that are unpleasant for patients and costly for patients and governments. The costs in terms of human suffering, disability, and socioeconomic loss are immeasurable.

In Iran, diagnosis and treatment of the disease are offered free of charge; fees are paid by the government and several charities. This has resulted in an increase in the number of immigrants with tuberculosis from neighboring countries into Iran.

The average cost of treating a person with tuberculosis increases with greater resistance. The rate of resistance to any drug or drug combination in neighboring countries such as Afghanistan was more than 2-fold compared with Iran [1]. Also, the high rate of drug resistance among Afghan immigrant cases in Iran as well as an 8-fold increase in the incidence rate in Iranian patients should guide policymakers to consider tuberculosis screening of migrants from high-burden settings [2]. Recently, we observed that the number of patients who were referred from the Republic of Azerbaijan to northwest Iran increased from 12% in 2003 to 22% in 2012. The rate of MDR tuberculosis in the region was about 1.9%, while the rate of MDR tuberculosis in isolates from the Republic of Azerbaijan was about 28.6%. The rate of tuberculosis transmission from Azerian patients was 5.8% [3].

The high degree of polymorphism of the IS6110-restriction fragment length polymorphism patterns among isolates from portions of Iran where there is a high prevalence of tuberculosis may reflect the influence of migration from other countries and other parts of Iran [2]. Because of the long-time recurrence nature of tuberculosis and the high prevalence of MDR tuberculosis in isolates from countries with a high tuberculosis burden, Iran will face an outbreak of MDR tuberculosis, and considerable economic burden will be placed on the overall health system.

Note

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