





Latent Tuberculosis Infection Treatment Regimens

Treatment regimens for latent TB infection (LTBI) use isoniazid (INH), rifapentine (RPT), or rifampin (RIF). **CDC and the National Tuberculosis Controllers Association preferentially recommend short-course, rifamycin-based, 3- or 4-month latent TB infection treatment regimens over 6- or 9-month isoniazid monotherapy.**

Clinicians should choose the appropriate treatment regimen based on drug susceptibility results of the presumed source case (if known), coexisting medical conditions (e.g., HIV*), and potential for drug–drug interactions.

https://www.cdc.gov/mmwr/volumes/69/rr/rr6901a1.htm?s_cid=rr6901a1_w

	DRUG	DURATION	FREQUENCY	TOTAL DOSES	DOSE AND AGE GROUP
Preferred	ISONIAZID[†] AND RIFAPENTINE^{††} (3HP) 	3 months	★ Once weekly	12	Adults and children aged ≥12 yrs INH: 15 mg/kg rounded up to the nearest 50 or 100 mg; 900 mg maximum RPT: 10–14.0 kg; 300 mg; 14.1–25.0 kg; 450 mg; 25.1–32.0 kg; 600 mg; 32.1–49.9 kg; 750 mg; ≥50.0 kg; 900 mg maximum Children aged 2–11 yrs INH [†] : 25 mg/kg; 900 mg maximum RPT ^{††} : See above
	RIFAMPIN[§] (4R) 	4 months	Daily	120	Adults: 10 mg/kg; 600 mg maximum Children: 15–20 mg/kg; 600 mg maximum
	ISONIAZID[†] AND RIFAMPIN[§] (3HR) 	3 months	Daily	90	Adults INH [†] : 5 mg/kg; 300 mg maximum RIF [§] : 10 mg/kg; 600 mg maximum Children INH [†] : 10–20 mg/kg [#] ; 300 mg maximum RIF [§] : 15–20 mg/kg; 600 mg maximum
Alternative	ISONIAZID[†] (6H/9H) 	6 months	★ Twice weekly [¶]	52	Adults Daily: 5 mg/kg; 300 mg maximum Twice weekly: 15 mg/kg; 900 mg maximum Children Daily: 10–20 mg/kg [#] ; 300 mg maximum Twice weekly: 20–40 mg/kg [#] ; 900 mg maximum
		9 months	★ Twice weekly [¶]	76	

*For persons with HIV/AIDS, see Guidelines for the Use of Antiretroviral Agents in Adults and Adolescents Living with HIV available at: <https://aidsinfo.nih.gov/guidelines/html/1/adult-and-adolescent-arv/367/overview>.

[†]Isoniazid is formulated as 100-mg and 300-mg tablets.

^{††}Rifapentine is formulated as 150-mg tablets in blister packs that should be kept sealed until use.

[¶]Intermittent regimens must be provided via directly observed therapy (i.e., a health care worker observes the ingestion of medication).

[§]Rifampin (rifampicin) is formulated as 150-mg and 300-mg capsules.

^{||}The American Academy of Pediatrics acknowledges that some experts use rifampin at 20–30 mg/kg for the daily regimen when prescribing for infants and toddlers (Source: American Academy of Pediatrics.

Tuberculosis. In: Kimberlin DW, Brady MT, Jackson MA, Long SS, eds. Red Book: 2018 Report of the Committee on Infectious Diseases. 31st ed. Itasca, IL: American Academy of Pediatrics; 2018:829–53).

[#]The American Academy of Pediatrics recommends an INH dosage of 10–15 mg/kg for the daily regimen and 20–30 mg/kg for the twice weekly regimen.

