





Clinical efficacy and safety of fluoroquinolone containing regimens in patients with *Mycobacterium avium* complex pulmonary disease

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Fluoroquinolone containing regimens for *Mycobacterium avium* complex pulmonary disease demonstrated similar treatment outcomes, but more adverse events, than standard triple therapy http://bit.ly/2RdlFpa

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To the Editor:

Mycobacterium avium complex pulmonary disease (MAC-PD) is an increasing problem worldwide [1]. The American Thoracic Society/Infectious Diseases Society of America (ATS/IDSA) guidelines recommend a macrolide-ethambutol-rifamycin combination as first-line treatment for MAC-PD (standard triple therapy) [2]. This therapy results in microbiological success in only 52–60% of patients [3, 4]. Treatment discontinuation or modification due to toxicity is common [5, 6]. Fluoroquinolones are frequently prescribed for MAC-PD [7]. Although favourable activity has been shown *in vitro* and in mouse models [8], there is little clinical evidence supporting their efficacy and safety for MAC-PD [9–11]. We sought to investigate treatment outcomes and adverse events among MAC-PD patients treated with fluoroquinolone-containing therapy *versus* standard triple therapy.