endTB

aims to find shorter, less toxic and more effective treatments for multidrug-resistant TB (MDR-TB) through access to new drugs, two clinical trials and advocacy at national and global levels.

Each year, there are approximately 500,000 new cases of MDR-TB worldwide - but only a tiny fraction are successfully treated.

The endTB clinical trial, led by Médecins Sans Frontières/Doctors Without Borders, Partners In Health and Interactive Research and Development and funded by Unitaid, is a randomized, controlled trial that aims to provide high-quality evidence on new, all-oral, shortened regimens.

The endTB trial was completed in June 2023. **Results will be presented** at the **Union World Conference on Lung Health**, in Paris, November 15-18, 2023. **Join us for these presentations:**

SYMPOSIUM:
Innovation to guide practice in MDR/RR-TB treatment: efficacy and safety results of the endTB trial

15 NOVEMBER

10:15 - 11:45, room 252AB

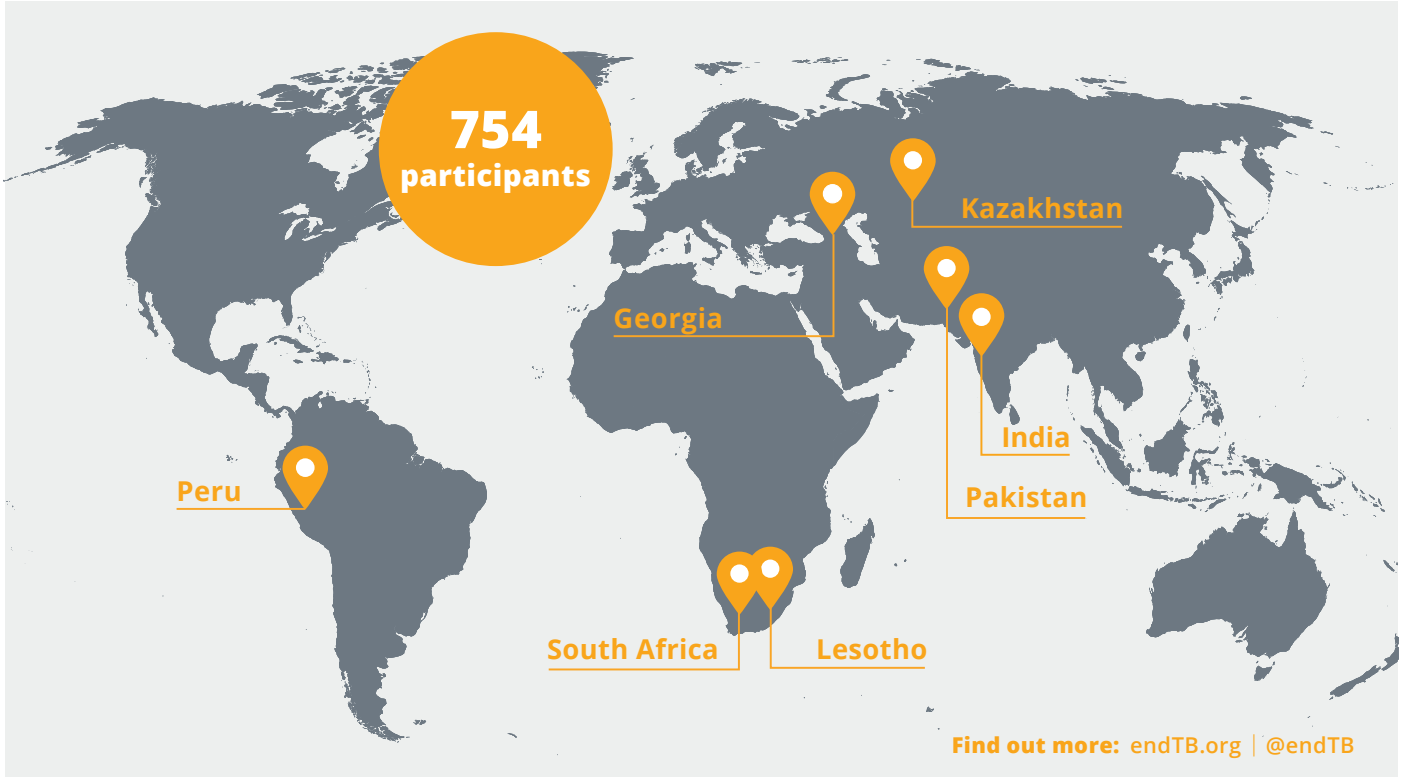
COMMUNITY CONNECT SESSION:
Researchers sharing with communities: Results from the endTB trial

17 NOVEMBER

18:00 - 18:45, room Foyer Bleu Paris

More information on the Union conference at **conf2023.theunion.org**

endTB TRIAL SITES



WHY ARE THE endTB RESULTS EXCITING?

endTB:

Closed the evidence gap: the endTB trial picked up where the pharmaceutical industry left off in its development of the new anti-TB drugs, bedaquiline and delamanid. Pharma companies had demonstrated the benefit of adding these drugs to old, toxic, long regimens but had no plans to optimize their use.

Studied multiple regimens simultaneously: endTB is a Phase III randomized controlled trial comparing five 9-month experimental regimens to the current standard of care with the objective of finding multiple new treatment options for MDR-TB.

Trial Regimens	Bedaquiline	Delamanid	Clofazimine	Linezolid	Quinolone	Pyrazinamide	Regimen abbreviation
endTB 1	Bdq			Lzd	Mfx*	Z	9BLMZ
endTB 2	Bdq		Cfz	Lzd	Lfx**	Z	9BLLCZ
endTB 3	Bdq	Dlm		Lzd	Lfx**	Z	9BDLLZ
endTB 4		Dlm	Cfz	Lzd	Lfx**	Z	9DLLCZ
endTB 5		Dlm	Cfz		Mfx*	Z	9DMCZ
Control Arm	Standard of care, composed according to latest WHO Guidelines						

Mfx* = moxifloxacin; Lfx** = levofloxacin

endTB 1 to 5 = 9 months - Control Arm = 18-24 months

Adopted an innovative trial design: endTB used Bayesian adaptive randomization to randomize more patients to arms that performed well, allowing for shorter time to robust results on more regimens.

Achieved diverse, inclusive enrollment in the study: by including adolescents (over 15 years old), people from four continents and people affected by comorbidities that commonly occur with MDR-TB (such as HIV, hepatitis C, diabetes, substance use disorders), endTB deviated from the norm in clinical trials and informed patient treatment in routine care. By retaining participants who became pregnant, endTB also informed routine care for this vulnerable population.

Determined potential for regimens that can be used in pediatric populations and pregnancy: drugs contained in all endTB regimens are recommended for use in children and have pediatric formulations. The trial could provide evidence for safe, effective, simplified treatment alternatives for children. endTB regimens contain only drugs that, on the balance, are generally accepted for use in pregnancy. Non-inferior regimens could be recommended for pregnant people.

ARE YOU INTERESTED IN FURTHER LEARNING FROM THE endTB PROJECT DATA?

The endTB data sharing initiative (eDSI) aims to give equitable access to data from the endTB observational study and endTB and endTB-Q clinical trials for a range of users who share the common goal of increasing knowledge and disseminating information to improve care for MDR-TB patients. More information on the eDSI are available on the endTB website.

Please scan this QR code to sign up and be notified when new endTB data becomes available

Check out our website endTB.org and contact us at endTB.clinicaltrial@paris.msf.org for more information

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