Curative therapy for TB has been available since about 1950. Early on it was noted, however, that predictable, consistent multiple drug regimens were required to prevent treatment failure and acquired drug resistance. The importance of this was emphasized when TB rates exploded in populations where AIDS was common. Multiple-drug resistant MDR-TB, then extensively drug-resistant XDR-TB appeared.

The fundamental issue was that unstructured programs, while curing many, spawned these cases which multiplied due to transmission to other patients with AIDS and to the health-care workers attending them. Treatment requires often toxic, very expensive medications; one such patient may require a regimen that equals the cost of the management of hundreds of drug-susceptible patients.

There is immense unease over the steadily rising percentage of drug-resistant cases. Here in the US we have virtually turned off the resistance epidemic with almost universal "Directly Observed Therapy" (DOT). But this has largely been unavailable in the regions where the epidemic rages most aggressively. At this point we are classically "damned if we do, damned if we don't."

**EVERYONE IS WELCOME.** The discussion starts at 6:30 in the Mercantile Room (no food service there). Come before 6 PM to leave yourself time to get something to eat, or stay and eat afterwards. We end around 8 PM.

There’s no charge. The Wynkoop is generously providing the facility; we buy our own drinks. It is first come, first seated, and seating is limited so that everyone can take part in the discussion.

The Colorado Café Scientifique is organized by an informal group of faculty from CU and institutions up and down the Front Range, as well as science fans from industry, government and elsewhere. We welcome your input, including ideas for speakers and topics. Bring them with you to the next Café, or e-mail them and any questions to John.Cohen@UCDenver.edu

**Essential information about the topic and the event on our Web site at:** CafeSciColorado.org