

**SPEAKER 1:** OK, so let's talk about treatment. So guideline-based treatment sounds like a great recipe for what to do. But it's a complicated recipe, because there are many branch points to consider. So first of all, the most well-established part of guideline-based therapy is the three drugs that I mentioned-- the macrolide, the rifampin, and ethambutol. However, you have an option of giving these drugs, as I like to do then, introduce them one at a time. And you have an option of whether to give them daily or three times a week.

So three times a week treatment is as good as daily treatment in certain circumstances, particularly when there's very modest radiographic abnormalities. The less radiographic abnormalities, the more comfortable I am giving the three drugs, three times a week. I would never do that in patients with cavitory disease. However, if there is no cavitory disease and symptoms are relatively modest, then three times a week is fine. Daily treatment is for patients who have a bit more disease, and maybe a small cavity-- preferably no cavity-- but a small cavity is OK for three times a week.

If there is a cavity and if the patient is acutely ill with significant fever, weight loss, and symptoms like that, then that's when you want to add an intravenous drug like amikacin or consider inhalation with the new options that are available.