

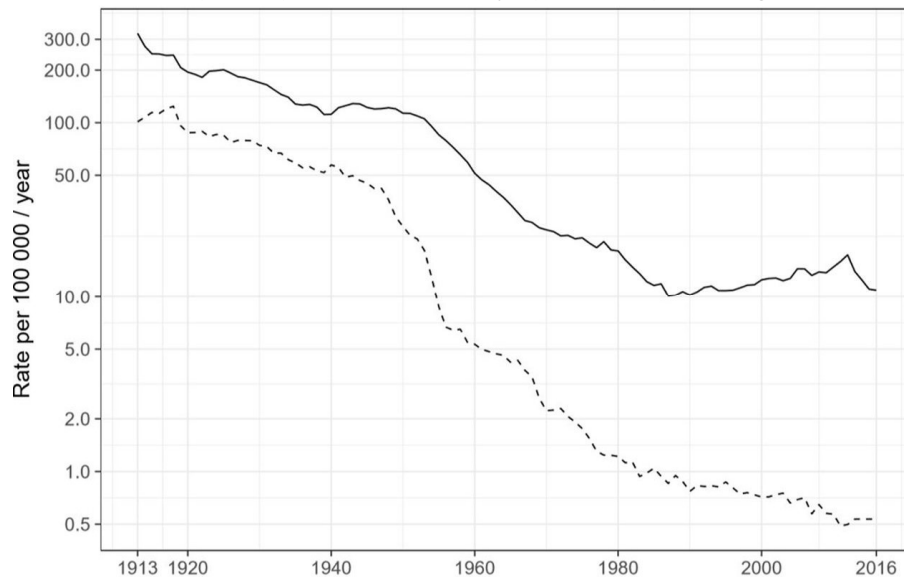
The background of the slide features abstract, overlapping green geometric shapes, primarily triangles and polygons, in various shades of green, creating a modern and dynamic visual effect.

## Drug Resistant *Mycobacterium tuberculosis*: Evaluating Macrophage Evasion Mechanisms as Potential Targets for Anti-Virulence Drugs

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# *Mycobacterium tuberculosis: a Manageable Disease*

Incidence (Solid) and Mortality (Dashed) in England & Wales



TB incidence (solid line) and mortality (dashed line) rates per 100 000 populations per year in England and Wales, 1913-2016.

- ▶ Decline of tuberculosis cases over the years.
- ▶ Decreased percentage of cases ending fatally.
- ▶ Decline of cases caused by improved hygiene and preventative measures.
- ▶ Reduced fatalities caused by effective treatment using anti-microbials.

# Antibiotic Treatment

## First Line Antibiotics:

- ▶ Highly effective against *M. tuberculosis* with minimal side-effects.
- ▶ Isoniazid, Rifampicin and Pyrazinamide.

## Second Line Antibiotics

- ▶ More side effects, expensive and less effective at killing.
- ▶ Only used if resistant to first line drugs.
- ▶ Ofloxacin and Kanamycin.

# Treatment Duration



- ▶ *M. tuberculosis* is slow growing and has a long incubation time.
- ▶ Treatment over a long period of time is needed to kill all mycobacteria.

## First Line

- ▶ **6 to 9 months**

## Second Line

- ▶ **1 year+**

# Antibiotic Resistance

- ▶ Long treatment time more likely to cause missed doses or early stoppage.
  - ▶ Allows for *M. tuberculosis* to survive and mutate to resist antimicrobials.
  - ▶ Second line antimicrobials need to be used for a longer period of time.
  - ▶ Leads to more missed doses etc. and gains more resistances.
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- ▶ **MDR-TB:** Multidrug Resistant Tuberculosis.
  - ▶ **XDR-TB:** Extensively Drug Resistant TB.

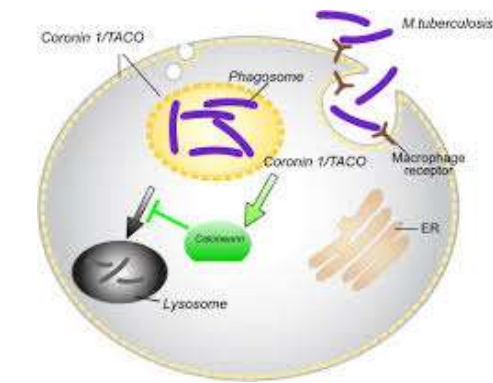
Are antibiotics the only way to combat  
TB?

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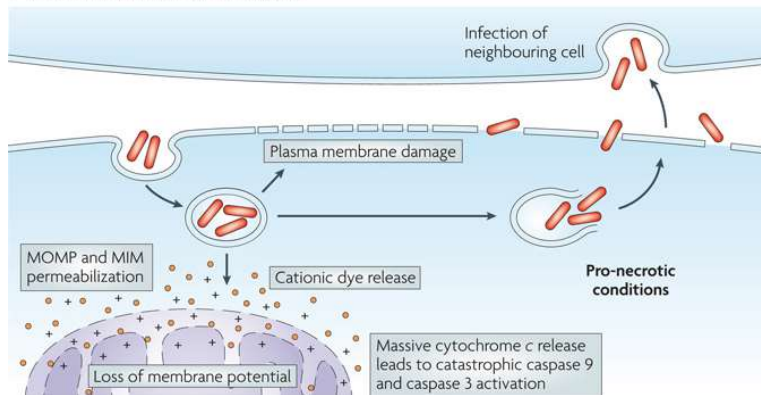
# Antivirulence Drugs for *M. tuberculosis*

- ▶ Designing drugs to target and block mechanisms of pathogenesis and disease.
- ▶ Aims to “disarm” the pathogen, not to kill it.
- ▶ “Evolution-Proof”: weaker selection pressure = less likely to acquire resistance.
- ▶ Can be designed to be species specific and not affect commensal bacteria.

# *M. tuberculosis*: Evasion of Macrophages



c Infection with virulent *M. tuberculosis*



- ▶ Co-evolved with humans to evade immune system
- ▶ Prevents phagolysosome formation via coronin-1 recruitment.
- ▶ Escapes the phagosome via ESAT-6 membrane lysing activity.
- ▶ Induces cell death by inhibiting membrane repair mechanisms.



# Dissertation Overview

- ▶ Explain how drug resistance can be developed and its impact on modern medicine.
- ▶ Describe the antimicrobial processes of macrophages.
- ▶ Identify the mechanisms *M. tuberculosis* employs to evade these processes.
- ▶ Explain which mechanisms could be good targets for antivirulence drugs.
- ▶ Discuss the effectiveness of current antibiotic treatments for *M. tuberculosis* and possible anti-virulence drugs.
- ▶ Evaluate the challenges for discovering and introducing antivirulence drugs.

THANK YOU

