The goal of our study was to evaluate combined usage of the amino acid-comprising hepatoprotector L-arginine L-glutamate (G) with magnetic infrared laser therapy (MLT) efficacy under pulmonary TB chemotherapy (CHT).

There were 53 patients suffering with newly detected destructive pulmonary TB (NDDPTB). All patients were separated in 4 groups as follows: I group (15 patients) – [CHT +G], II group (13 patients) – [CHT+MLT], III group (16 patients) – [CHT+G +MLT], CHT – control group (IV). There were analyzed intoxication syndrome (IS) dynamics, times of bacterial excretions termination and cavitary closures, hepatotoxic side reaction (HSR) frequency, liver bloodstream condition while CHT.

Results. Before treatment one could observe pulse blood filling decrease (9%), intraliver bloodstream change (40%), venous outflow (70%). As a results in III group one could see essential improvement of liver bloodstream 1.45 to compare with that of IV group 0.8, as well as venous outflow of 4 to compare with 1.2, respectively. In III group HSR frequency with CHT was 2.4 times more rarely than that of IV group, 3.5 times – toxic-allergic reaction, respectively. It has been noted that in III group IS vanished 1.5 week earlier than those of a control group, increased the rate of the bacterial excretion termination by 13.4% and cavitary closures by 1.2 times, decreased their term on (15.5±3.2) days on average and by 1.4 months, accordingly.

It has been shown that combined therapy NDDPTB [L-arginine L-glutamate + MLT + CHT] - 1) improves liver bloodstream, 2) reduces side effects frequency 3) results in acceleration of intoxication syndrome decrease, bacterial excretion termination and cavitary closures.