I.3	Ethionamide – drug-susceptible tuberculosis meningitis – EML and EMLc
Draft recommendation	☒ Recommended ☐ Not recommended Justification: TB meningitis if not diagnosed or treated early can cause irreversible neurological sequelae or even death. It is more common in children and people living with HIV. Ethionamide is already in the complementary list in the anti-TB medicine list and as an alternative regimen to the 12 month regimen. Systematic review and meta-analysis has proven favourable outcomes and no relapse after 2 years of completing the treatment when the 6 month (6HRZEto) was compared to the 12 month (2HRZE/10HR) replacing the ethambutol with ethionamide
Does the proposed medicine address a relevant public health need?	☒ Yes ☐ No ☐ Not applicable Comments: TB meningitis common in children and people living with HIV
Does adequate evidence exist for the efficacy/effectiveness of the medicine for the proposed indication? (this may be evidence included in the application, and/or additional evidence identified during the review process)	☒ Yes ☐ No ☐ Not applicable Comments: Systematic review and meta-analysis proven
Does adequate evidence exist for the safety/harms associated with the proposed medicine? (this may be evidence included in the application, and/or additional evidence identified during the review process)	☒ Yes ☐ No ☐ Not applicable Comments: Already included in the complementary list for anti-TB medicines
Are there any adverse effects of concern, or that may require special monitoring?	☐ Yes ☒ No ☐ Not applicable Comments:

Are there any special requirements for the safe, effective and appropriate use of the medicines? (e.g. laboratory diagnostic and/or monitoring tests, specialized training for health providers, etc)	☐ Yes ☒ No ☐ Not applicable Comments:
Are there any issues regarding cost, cost-effectiveness, affordability and/or access for the medicine in different settings?	☐ Yes ☒ No ☐ Not applicable Comments:
Are there any issues regarding the registration of the medicine by national regulatory authorities? (e.g. accelerated approval, lack of regulatory approval, off-label indication)	☐ Yes ☒ No ☐ Not applicable Comments:
Is the proposed medicine recommended for use in a current WHO guideline? (refer to: https://www.who.int/publications/who-guidelines)	☒ Yes ☐ No ☐ Not applicable Comments: 6 months regimen