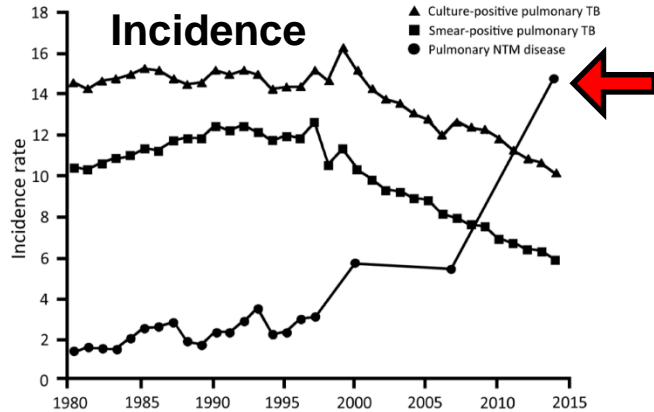
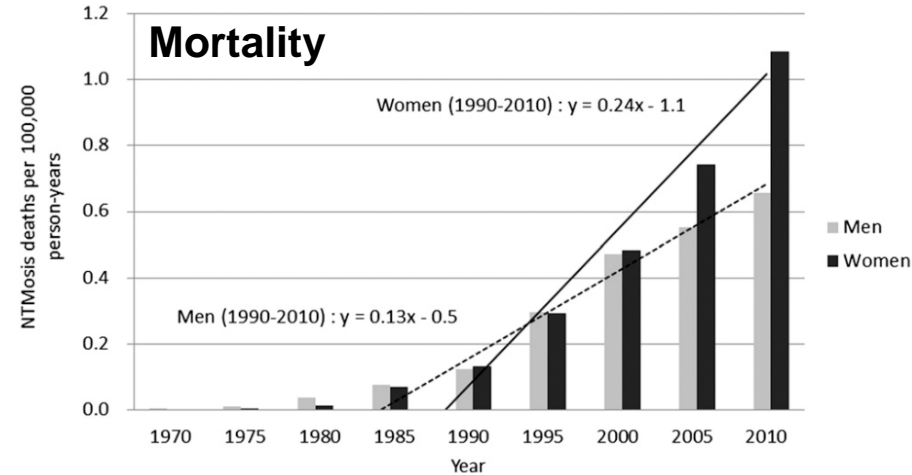


Background in Japan

- The incidence and mortality of nontuberculous mycobacterial (NTM) lung disease (NTM-LD) has been increasing.



Namkoong H et al. *Emerg Infect Dis*, 2016.



Morimoto K et al. *Annals of ATS*, 2014.

- Mycobacterium avium* complex lung disease (MAC-LD), the most common form of NTM pulmonary infection in Japan, generally causes a slowly progressive disease in immunocompetent host.
- Established MAC-LD are often incurable or recurrent.
- Little is known about biomarkers for monitoring disease activity in MAC-LD.

NTM research at Keio University Hospital

- Study design and setting: Prospective observational study
- Period: June 2012 –
- Patients: Adult patients with diagnosed or suspected with NTM-LD according to ATS/IDSA 2007 statements
- Evaluation
 - Clinical data
 - Pulmonary function test
 - Computed tomography
 - Six-minute walk test
 - SF-36 and St. George's Respiratory Questionnaire (SGRQ)
 - Patients' DNA and plasma sample (From February 2016 -)
- 250 patients followed for more than 3 years

NTM-bronchiectasis registry in Japan

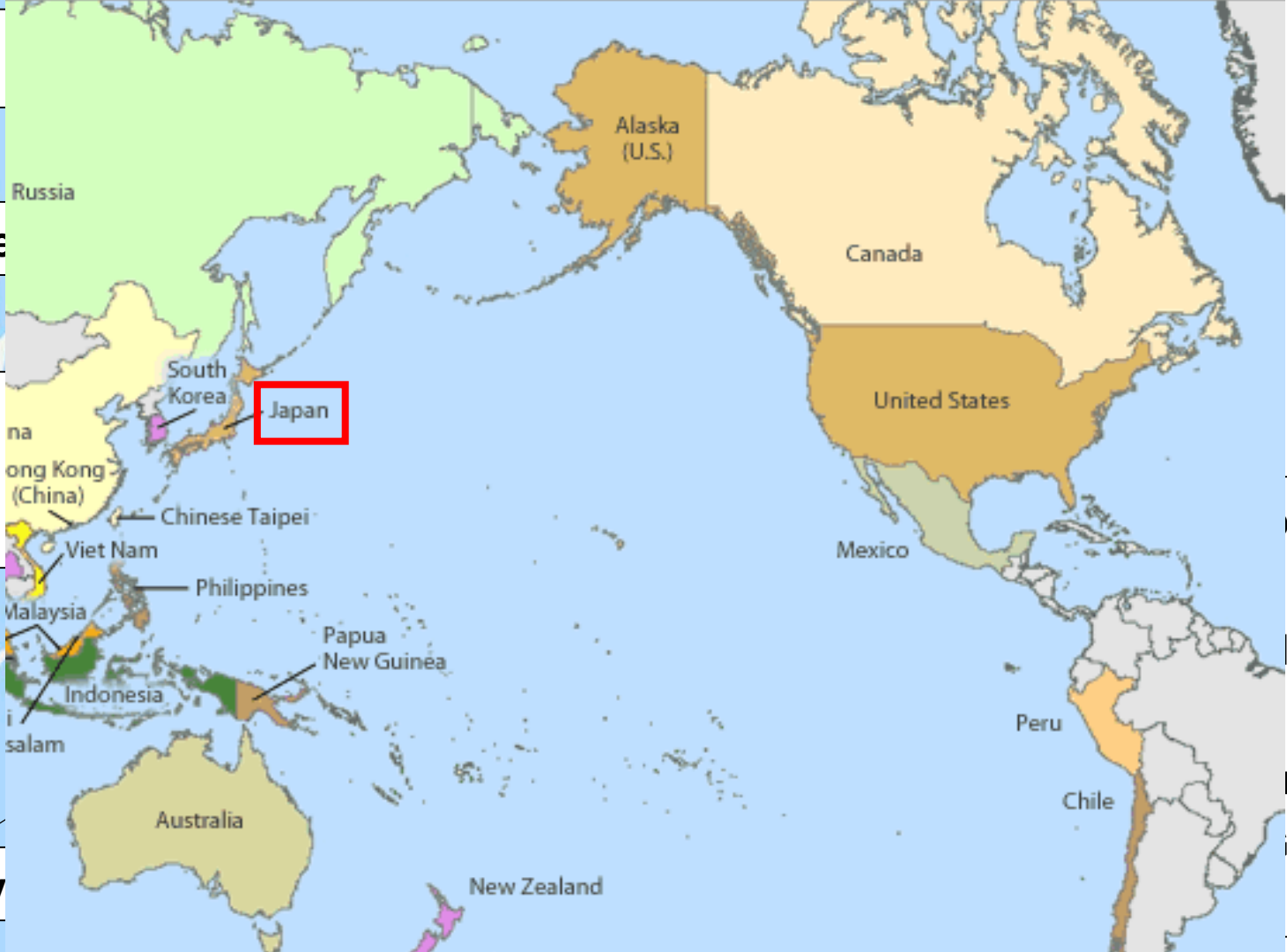
- Study Design and Setting: Prospective observational study in 12 hospitals
- Period: November 2017 –
- Patients
 - 1) Adult patients with diagnosed with **NTM-LD** (ATS/IDSA 2007 statements)
 - or 2) Adult patients with **bronchiectasis**
(Chronic respiratory symptoms + CT-confirmed bronchiectasis)
- Evaluation
 - Symptoms including mMRC scale, and comorbidity
 - Laboratory investigation for causes of bronchiectasis
 - Pulmonary function test
 - Computed tomography (chest and sinus [if available])
 - Six-minute walk test (if available)
 - Sputum AFB smear and culture
 - EQ-5D-5L, QOL-B
 - DNA and plasma sample (if available)



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