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| **Resolution of *Mycobacterium abscessus* disease following initiation of elexacaftor/tezacaftor/ivacaftor** |
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| **Introduction:**  Elexacaftor/tezacaftor/ivacaftor (ETI) is a CFTR modulator therapy that has dramatically improved the health outcomes for many patients with cystic fibrosis. There is increasing interest in the role of CFTR modulators in the prevention and treatment of respiratory infections in people with cystic fibrosis.  **Case Summary:**  A 19-year-old male with F508del homozygous cystic fibrosis developed cavitary *Mycobacterium abscessus subspecies bolletii & massiliense* respiratory infection. Antimycobacterial antibiotic treatment was not given as it was deemed unlikely to be tolerated by the patient on account of his profound autism spectrum disorder. His developmental disability meant that it was not considered feasible to pursue a conventional treatment regimen for *Mycobacterium abscessus* which would typically involve a high burden of healthcare contact, frequent and potentially severe treatment-related adverse effects and toxicity, and modest expectations for successful eradication. Elexacaftor/tezacaftor/ivacaftor was initiated which resulted in an immediate clinical and radiological improvement in this patient’s cavitary NTM disease. Conventional antibiotic treatment for *Mycobacterium abscessus* was successfully avoided.    **Conclusion:**  This case adds to the evidence base that suggests CFTR modulators, particularly elexacaftor/tezacaftor/ivacaftor, may restore innate immune function leading to improved outcomes for pulmonary infection in people with cystic fibrosis.  **Grant Support:**  Nil  **Key Words:**  Cystic fibrosis  Nontuberculous mycobacterium  Mycobacterium abscessus  Elexacaftor/Tezacaftor/Ivacaftor |