Multifocal Tuberculosis in an immunocompetent patient with sternal unusual location: About an observation

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The multifocal tuberculosis usually associated with immunosuppression including HIV. We report a case of multifocal tuberculosis in an immunocompetent patient with multiple foci including the sternum which is a rare location. A 32 year old woman with a concept of positive TB contagion; complained for more than 6 months of back pain, neck pain and sternal chest pains pre stubborn and rebellious to treatment evolving with fever with weight loss and profuse sweating. On examination there is an average condition, a stiff neck and paresthesia of upper and lower limbs. Thoracoabdominal CT found an abscess in paravertébral T7-T8, lacunar homes in L1 T5 and the manubrium sternal necrotic mediastinal lymph nodes, pulmonary infiltrates, and splenic nodule of 07 mm. Bone marrow MRI found a pre spinal collection at the height T1 T2 and another at the height of T7 T8 with fat infiltration and root canal extension back the spinal cord and multiple foci of vertebral alterations T3 T4 and T5. In biology, an inflammatory syndrome, a moderate anemia, a negative HIV status, the Wright negative serology, the AFB in sputum negative direct examination and culture, positive I’DRt to 22 mm and phlyctenular the puncture paravertebral abscess brought the franc typical bright yellow pus casein. The short-term outcome was favorable on TB treatment and immobilization in lumbar corset, marked clinical improvement with weight gain 11 kg and radiological with early spinal and sternal reconstruction. Osteoarticular tuberculosis predominates at the spine and weight-bearing joints, the sternal involvement is very rare and represents less than 1% of bone lesions. Usually Pott’s disease involves two or more vertebrae contiguous hematogenously because only one intervertebral artery irrigates two adjacent vertebrae, it was reported one patient with spondylodiscitis interesting non-contiguous multifocal tuberculous thoracic and lumbar spine of 694 patients. Reaching under single splenic nodular form is unusual. Multifocal tuberculosis is usually serious of which may jeopardize the vital prognosis of patients, it often requires a lengthy and cumbersome process. The elderly and immunocompromised represent a risk land. However, it can occur in the absence of risk factors, as is the case of our patient.

Biography
Daouia Bourkadi is graduated MD from the medical school ORAN; Algeria in 2005, qualified specialist in pneumophtisiology in 2010, recently appointed assistant professor in 2015 at the university hospital of ORAN ,ALGERIA. An active member of the organizing committee of the national dayspneumophtisiology for 4 years and moderated poster presentations during these scientific days, I also participated in smoking cessation with companions in the world days of anti fight tobacco.

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