

Rare case of Primary Prostate Tuberculosis

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Abstract

Introduction:-

Genitourinary tuberculosis(20%) is a common type of extra-pulmonary Tuberculosis .The kidneys, ureter, bladder or genital organs are usually involved. Tuberculosis of the prostate has becoming more common in immune-compromised patients. However, it could be rarely found as an isolated lesion in immune-competent patients.

Case Report:

A 42yr old non diabetic male presented with c/o burning micturition, weight loss(4kgs in 2month) and nocturia for past 2 month. He has no other co morbidities or immunodeficiencies.No h/o prior ATT and contact. BCG vaccinated. Digital rectal examination showed nodule over prostate. Lab investigation showed ICTC – negative; PSA 2.23ng/ml (normal <1.3).His urine AFB(3 samples) absent and urine culture showed no growth.CXR – No abnormality detected. USG abdomen and scrotum normal.CT chest showed no parenchymal or mediasternallesion.MRI pelvis showed Multiple T1 and T2 hypointense nodules, largest in the left lobe of the prostate in the peripheral zone in the mid gland. Trans Rectal Ultrasound (TRUS) guided biopsy was done and HPE shows extensive areas of necrosis and multiple caseating epitheloidgranulomata.Tissue CBNAAT – MTB detected low and rifampicin sensitive. ATT was initiated.

Discussion:

The Genitourinary tuberculosis represents 20% of all locations of extra-pulmonary tuberculosis. Prostate involvement, especially if it is isolated, is rare. Its incidence is estimated at 6.6% of the urogenital tuberculosis.It can be primary or secondary to epididymal tuberculosis or bladder. The hematogenous spreading is one of the common way contaminations. This infection is promoted by some immunosuppressive diseases such as AIDS and taking of corticosteroid and chemotherapy. The clinical signs of lower urinary tract obstruction such as dysuria, urinary frequency and perineal heaviness can be observed. Digital rectal examination can enjoy enlarged prostate, elastic consistency, firm or stony or nodular as in our case. Tuberculosis of the prostate may be difficult to differentiate from carcinoma of the prostate and the chronic prostatitis when the prostate is hard and nodular on digital rectal examination and the urine is negative for

Tuberculosis bacilli. In many cases, a diagnosis of tuberculosis prostatitis is made by the pathologist, or the disease is found incidentally after trans-urethral resection

Conclusion:

Though the incidence of isolated prostate TB is rare condition, TB prostate should be borne as differential diagnosis for Prostatitis even in immunocompetent. Therefore,Transrectal ultrasound-guided needle biopsy of the prostate for TB molecular testing can yield a reliable diagnosis andis recommended as the method of choice for diagnosis.



Biography

A.Keerthi Prakash .Rare case of Primary Prostate Tuberculosis, Institute of Thoracic Medicine, Madras Medical College, Chennai.

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