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Title: Confirmed pulmonary tuberculosis leading to late diagnosis of lung cancer - Study case

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Body: We report the case of a 56 years old man, unemployed, smoker, that was admitted for fever, chills, productive cough and progressive dyspnea symptoms that were present for the last two months and were not influenced by an antibiotic treatment for 10 days. Physical exam: pale sweated skin, fever, onychomycosis, diminished breath sounds and rough sounds in middle areas of the lungs, SaO2 – 96%. Chest x-ray revealed nodular opacities of different sizes and small associated cavitations in both upper areas of the lungs. Sputum smears and culture were positive for mycobacterium tuberculosis. So the diagnosis for him was pulmonary tuberculosis and he was treated with specific antituberculosis treatment. After 90 days his condition got worse and the thorax and abdominal computed tomography evidenced a tumor like mass of 8/7 cm in the right upper lobe with central necrosis and multiple thoracic lymph nodes (some organized in lymphatic masses), also many round shaped tumor like masses inside the liver. Final diagnosis: Right lung cancer T2N2M1 (stage IV), Confirmed pulmonary tuberculosis situated on both upper lobes. Conclusion: Confirmed simultaneous pulmonary tuberculosis delayed thorax computed tomography and the diagnosis of the lung cancer in upper right lobe. Patients that are diagnosed with tuberculosis, smoker or ex- smokers, should be investigated more carefully taking in consideration the possible association with cancer, and other investigations for diagnosing neoplastic diseases should be done in the same time with the ones for TB.