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Title: Spectrum of urogenital tuberculosis

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Body: Introduction. Urogenital tuberculosis (UGTB) is one of the most common forms of tuberculosis (TB) after pulmonary TB. Material and methods. With purpose to estimate clinical features of UGTB we analyzed history cases of 131 patients. Results. Among 131 pts with UGTB 88 (67.2%) had isolated kidney TB (KTB): 10 pts (10.2%) – TB of parenchyma, 35 pts (39.8%) – papillitis, 22 pts (22.4%) - cavernous KTB, 21 pts (21.4%) - polycavernous KTB); in 10 pts alongside with polycavernous KTB male genital TB (MGTB) was diagnosed. In 33 pts (25.2) MGTB only was revealed: in 14 – orchiepidydidimitis, and in 19 – prostate TB. Main clinical features were pain (flank or perineal), dysuria, hematuria, hemospermia, toxicity, but their frequency varied from 0 till 60.0% in different groups. Among all cohort of UGTB asymptomatic course was in 12.2%, among kidney TB - in 15.9%. Every third patient complained of flank pain and dysuria (accordingly 35.2% and 39.8%), 17% presented toxicity symptoms, 9.1% - renal colic, 7.9% - gross-hematuria. MBT was found in 31.8% in isolated kidney TB as whole. Sterile pyuria was in 25%. The onset of TB orchiepidydydmitis was in 35.7%, hemospermia - in 7.1%, dysuria - in 35.7%. Most common complaints for prostate TB were perineal pain (31.6%), dysuria (also 31.6%), hemospermia (26.3%). MBT in prostate secretion / ejaculate was revealed in this group in 10.5%. Conclusion. UGTB is a heterogeneous disease. Term UGTB is incorrect and incomplete for characteristic of clinical features, as it combines some different forms of the disease with their own clinical features and outcomes. UGTB is collective term, and it's using may lead to discrepancy, misunderstanding and misdiagnosing.