

European Respiratory Society Annual Congress 2013

Abstract Number: 1097

Publication Number: P4444

Abstract Group: 10.2. Tuberculosis

Keyword 1: Infections **Keyword 2:** Tuberculosis - diagnosis **Keyword 3:** Pleura

Title: Tuberculous pleuritis – Single centre experience

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Body: Background: Tuberculous pleuritis is the second most common extrathoracic form of tuberculosis (TB) after TB of peripheral lymph nodes. Material and methods: During two year period (2011-2012), 36 patients (pts) were analyzed, out of whom 27 (75%) were men and 9 (25%) were female with average of 43 years. Results: Unilateral pleural effusion was noticed in all pts. Hydropneumothorax was found in 4 (11%) pts with history of previous TB. Parenchymal lung changes were found in 25 (69%) pts with positive AFB (Acid Fast Bacilli) in 8 (22%) pts. Diagnosis was based on pleural biopsy in 27 (75%) and surgical biopsy during pleuroscopy, lung decortications and VATS (Video Assisted Thoracoscopic Surgery) in remaining 9 (25%) pts. Pathohistological diagnosis confirm TB pleuritis in all cases. AFB were not found in pleural puncture, while LÖW (Lowenstein-Jensen) cultures were positive only in 4 (11%) pts. Treatment included repeated pleural punctures and antituberculous drugs. Peroral corticosteroids were applied in 10 (28%)pts. Treatment management was succsesfull in 35 (97%) pts, while lethal outcome was notice in one (3%) pts. Conclusion: Unilateral pleural effusion should be suspect on specific, expecially in younger age. Diagnosis is based on pleural biopsy. In cases of negative pathohistological findings open surgical procedures are mandatory.