

European Respiratory Society Annual Congress 2012

Abstract Number: 4221

Publication Number: P2621

Abstract Group: 10.2. Tuberculosis

Keyword 1: Tuberculosis - diagnosis **Keyword 2:** Tuberculosis - management **Keyword 3:** No keyword

Title: Pulmonary tuberculosis presentation – Late diagnosis, advanced disease

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Body: Pulmonary TB is the disseminating form of the disease. Rates are particularly high in urban areas associated with poverty, crowded living, social instability and HIV infection. Objective: to describe clinical and radiological manifestations of pulmonary TB in a big Brazilian city and to evaluate the time between beginning of symptoms and diagnosis Methods: prospective descriptive study; patients with positive smear proceeding from the public laboratories of the city of Belo Horizonte were prospectively included between May 2006 and April 2008. Demographic data were investigated. Blood samples were drawn for HIV. Chest radiographs (CXR) – were examined. Sputa were cultured whenever possible. Results: 224 cases were included, 150 (67.0%) of the male sex. Age was 39.3 (\pm 13.0). Pulmonary manifestations occurred in almost all cases and systemic manifestations in 90%.

Respiratory manifestations of pulmonary TB (n = 224)

Manifestation	Frequency	%
Cough/production	221	98.7
Wheezing	111	49.8
Hemoptysis	71	31.7
Thoracic pain	165	73.7
Dispnoea	146	65.2

Time from beginning of symptoms and diagnosis was 16.26 (\pm 18.75) weeks. Cavitations were seen in 67.1% of cases.

Radiologic extension of pulmonary TB (n = 218)

Radiological presentation	n	%
Bilateral cavitary	96	42.8
Unilateral cavitary	50	22.3
Bilateral not cavitary	49	21.9
Unilateral not cavitary	26	10.3

MRTB occurred in 3/158 with culture (1,9%). HIV was positive in 5/222 (2.3%). Conclusion: Pulmonary positive TB had a late diagnosis in this big Brazilian city. Clinical presentation was of advanced disease with frequent cavitary lesions though multi resistance and HIV were not prevalent. Faster diagnosis should become available for high burden countries cities.