Title: Sarcoidosis and tuberculosis: A rare combination?

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Body: Tuberculosis and sarcoidosis are chronic granulomatous diseases that are similar in many aspects, although different. They occur concomitantly very rarely. TB is an infectious disease caused by M. tuberculosis morphologically defined by granulomas with caseous necrosis. Sarcoidosis is a systemic disease of unknown etiology, and is characterized by noncaseous granulomas. Aim of the study: to evaluate weather the high incidence of TB in our country affects the diagnosis and management of sarcoidosis.

Material and methods: We performed an analysis of 97 patient’s clinical records with biopsy proven or highly suggestive of sarcoidosis, cases registered in a third level medical institution, during year 2011. Results: we found 3 (3.1%) patients with concomitant diagnosis of TB and sarcoidosis, in whom sputum culture revealed M. tuberculosis (1-MDR tuberculosis, 1- poly-resistant). After 2 months of standard anti-TB treatment we have obtained culture conversion, but no improvement in chest X-ray and HRCT. Supplementation with corticosteroids (CS) leaded to full resorption of pulmonary lesions. Other 8 (8.2%) patients from 97, microbiologically negative, where initially diagnosed with pulmonary TB based on histological examination (caseating granulomas). Anti-TB treatment inefficiency imposed reconsideration of the diagnosis and initiation of steroid treatment, with clinical and radiological improvement after 4 months of CS. Conclusion: Infection with M. tuberculosis, seems to be not so infrequent in patients with sarcoidosis. The finding of necrotizing granulomas alone is not sufficient for the final clinical diagnosis of tuberculosis. Due to high incidence of tuberculosis in our country there is a tendency to overdiagnose tuberculosis.