Giant tuberculous abscess without primary focus identified

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Case report (Figure 1)

A 53-year-old woman was admitted to our orthopedic service because of a giant mass on the posterior aspect of the thigh. The mass had reached that size in about a year, and she had been treated by a physician with a combination of two broad-spectrum antibiotics.

The mass was about 50 × 20 × 25 cm without tenderness, fluctuation, temperature elevation or color changes. The patient was anemic but ESR and leucocyte count were normal. Radiographs of the chest and the spine were normal. Mantoux test was positive. Computed tomography demonstrated a mass extending from the iliac crest to the popliteal fossa. Bone scanning was normal. Microscopy of a needle biopsy specimen confirmed the diagnosis of tuberculosis.

A combination of antituberculosis drugs was administered and the mass was explored through a posterolateral exposure; about 10 liters of purulent material surrounded by a grayish firm tissue was drained, and pathologic tissues were excised. *Mycobacterium tuberculosis* was isolated, and the pathological study demonstrated caseating tuberculosis granuloma. 10 months postoperatively the patient was well and the mass had disappeared.

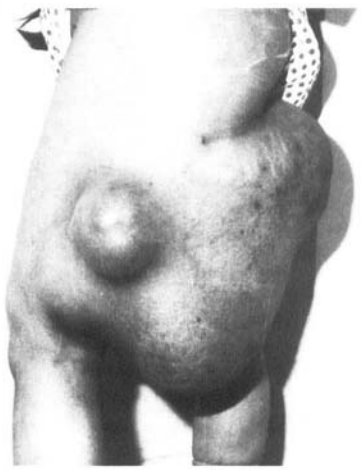

Figure 1. A 53-year-old woman with a 50 × 20 × 25 cm tuberculous mass on the posterior aspect of the thigh.

Discussion

Tuberculosis of the musculoskeletal system is generally the result of hematogenous dissemination, with lung serving as a primary focus in 75 percent of the patients (Edeiken et al. 1963, Shannon et al. 1990). Half of the adults with skeletal tuberculosis have involvement of the spine (Shannon et al. 1990), and a cold abscess detected in the thigh originates from the lumbar vertebrae (Tachdjian 1990). In our case, we could not identify a primary focus in the lung or in the vertebrae.

Skeletal involvement may be the only manifestation of tuberculosis (Meltzer et al. 1985, Antti-Poika et al. 1991), but to our knowledge this is the first case of abscess formation, without any clinical or radiological evidence of vertebral or lung tuberculosis, demonstrating such a giant mass. This may be due to administration of nonspecific antibiotic in the early phases of the disease.

References

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