

EXTRAPULMONARY TUBERCULOSIS: A PEDIATRIC CASE REPORT**B. Salihoglu¹, S. Hatipoglu¹, M. Barutcugil², S. Oztora², M. Vural³**

*¹Department of Pediatrics ²Department of Family Medicine ³Department of Orthopedics,
Bakirkoy Research and Education Hospital, Istanbul, Turkey
drbsalihoglu@hotmail.com*

A 15 month old infant presented to an orthopedist with history of gradual swelling of his fingers. Antibiotherapy and drainage was applied. Left hand third finger started to swell and right hand second finger became worse. The patient had no cough or fever on admission. His father had the history of pulmonary tuberculosis. On the lateral of second finger on the right hand, a skin lesion of 2x2cm, and sequestered bone fragment between the lips of the lesion was seen. He had linear ulcers on his neck and subcutaneous soft nodules on right postauricular area. The sedimentation rate was 56mm first hour. Hand radiography showed that dead bone was lateralised by the new bone formation. He was not vaccinated against Tuberculosis, PPD endurance was found 15x12mm. On direct smear of debrided tissue, acid-fast bacilli were negative. Bone sequestrectomy was applied. In the bony tissue pathology, granulomatous lesion with caseation necrosis, epithelioid histiocytes and Langerhans cells were seen. Treatment with 4 antituberculosis drugs for 2 months, 2 drugs for next 10 months resulted in resolution of the symptoms. Skeletal tuberculosis is a rare entity since antituberculosis therapy became available but tuberculosis is still a health problem in Turkey.



