

"Beyond The Knife"

Anas H; Sankar H;Manoharan K

Orthopaedic HRPB,Perak

INTRODUCTION:

Tuberculous arthritis, which affects 8% of the population¹, is a rare form of extrapulmonary tuberculosis¹. In this case report, we present a case of monoarticular right knee tuberculous arthritis treated with anti-tubercular drugs mainly without surgical intervention that resulted in a good outcome.

CASE REPORT:

We present a case of 31 years old male, who presented with six month history of right knee pain with swelling which affect his mobility. The patient neither reported any signs of pulmonary tuberculosis nor had any known exposure to tuberculosis.

On examination, the right knee was swollen, warm, and tender, with a restricted range of motion. Raised erythrocyte sedimentation rate (ESR) of 43 mm/hr, and a C-reactive protein (CRP) level of 13 mg/L noted. Right knee radiograph revealed no abnormality. The synovial fluid culture yielded mycobacterium tuberculosis.

Initiation anti tuberculosis treatment without surgery resulted in overall clinical improvement in patient symptoms in 4month.

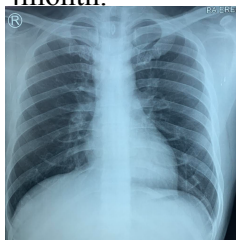


Figure 1: Chest xray



Figure 2: Right Knee Xray

DISCUSSION:

Tuberculous arthritis is diagnostically challenging due to its rarity, insidiousness, and ability to mimic clinical septic arthritis from other causes such as bacteria, fungi, and malignancies.

There is no consensus in managing this condition, as the patient will end up with joint washout. Early detection and quick administration of an anti-tuberculous medication can result in total remission of the illness and avert joint damage as shown in this case.

Conclusion:

Tuberculous arthritis should be considered in atypical presentations of monoarticular arthritis, especially in endemic areas, long-standing histories, or recurrent cases of septic arthritis. Surgery may not be necessary because antituberculous therapy is safe and effective in treating tuberculous arthritis.

REFERENCES:

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