Tuberculous hip septic arthritis - A case study

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INTRODUCTION:

Septic arthritis (SA) is a devastating infection into the joints which can lead to even worse sequelae especially in pediatric population. Generally SA of hip is considered rare and tuberculosis (TB) hip infection is even more uncommon. That being said, TB cases has consistently been increasing in trend with Sabah leading the number in particular. Left untreated, TB hip leads to progressive destruction to the joint which later can cause further deformity and functional loss.

REPORT:

A previously well 2-year-old boy presented with left hip pain and antalgic gait for 2 weeks preceded by an episode of fall from bed. During initial consultation at day 3 of trauma, he was discharged home with analgesics and with the diagnosis of muscle pain. They seek second medical opinion few weeks later due to persistent pain. Clinically the kid was not septic looking with left hip examination noted that it was externally rotated and in flexed position. Externally no skin changes or signs of infection noted.

Radiographic x-ray and MRI of the hip done in private setting noted extensive left hip joint collection with evidence of osteomyelitis to the femoral head. Hence proceeded with left hip arthrotomy washout and noted thick caseous material in the joint capsule with osteomyelitic changes of the femoral head. Intravenous antibiotic was administered for 1 week and was started with anti TB medications once intraoperative cultures of the synovium sent came back positive for Mycobacterium Tuberculosis and negative for bacterial growth. Upon discharged, he was given early follow-up for review.



Figure 1: Pelvic x-ray upon presentation



Figure 2: Pelvic x-ray post-washout. No subluxation or dislocation

CONCLUSION:

The diagnosis of tuberculosis cannot be excluded in cases of septic arthritis despite no positive history pointing towards the diagnosis especially in highly endemic region. Thorough investigation with simultaneous early initiation of treatments should ensue to prevent long term complications.

REFERENCES:

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