

## TUBERCULOSIS OF THE ISCHIUM

S. GARCÍA, J. M. SEGUR, A. COMBALÍA

**Tuberculosis remains frequent in some underdeveloped regions. Bone and joint tuberculosis is less frequent than pulmonary forms. One case of tuberculosis of the ischium is presented. Treatment by simple curettage and antituberculous drugs led to a good result.**

**Keywords :** tuberculosis ; ischium.

**Mots-clés :** tuberculose ; ischion.

At the present time, tuberculosis remains a disease that must often be considered in diagnosis and tuberculous osteoarthritis is a disease frequently encountered by orthopedic surgeons (17).

At least 10% of all infections caused by *Mycobacterium tuberculosis* are extrapulmonary forms, sometimes associated with pulmonary infection (1, 7, 14).

Bone and joint tuberculosis is less frequent than pulmonary forms (19). It accounts for 0.8% of all tuberculous infections and 20% of all extrapulmonary forms (7, 14). Among the general population, skeletal tuberculosis usually occurs in the spine and in the major joints (1, 6). The spine is affected in 50% of the cases, followed by the hip and the knee (15% each) (7, 13). Tuberculous osteitic lesions are almost always associated with arthritis (19).

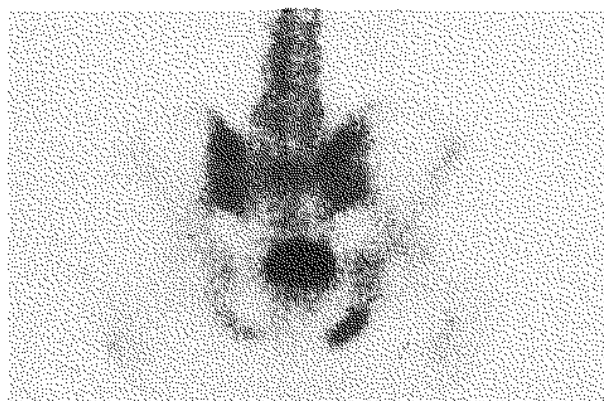
### CASE REPORT

A 71-year-old male patient, with no previous illness, was admitted complaining of a weight loss of 10 kg over the previous 6 months and of left groin pain persisting despite analgesic therapy. Physical examination showed a pale, skinny man of 53 kg. Movement of the left hip was very painful. Radiographs of the pelvis revealed an osteolytic lesion in the medial part of the left ischium

(fig. 1). Blood analysis demonstrated only an increased erythrocyte sedimentation rate. Bone scintigraphy performed with Tc99 showed increased radionuclide uptake in the same area (fig. 2).



*Fig. 1.* — Pelvic radiograph showing an osteolytic lesion at the medial part of the left ischium.



*Fig. 2.* — Scintigraphy with radionuclide deposition in the osteolytic area.

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Presumptive diagnoses of primary bone tumor, metastasis and osteitis were considered and an open biopsy and curettage of the ischium was performed for a definitive diagnosis. Löwenstein medium culture was negative and the microscopic examination ruled out primary bone neoplasm or metastasis. A chronic, granulomatous and necrotizing inflammatory lesion, including many giant plurinucleated Langerhans type cells and abundant areas of caseous necrosis compatible with tuberculosis, were detected. Antituberculous treatment with pirazinamide and ethambutol for 2 months, plus isoniazid and rifampicin for 6 months, was established with a good final result at 3 years follow-up.

### DISCUSSION

According to the literature, tuberculous osteoarthritis accounts for 2 to 10% of all forms of tuberculosis (14, 15, 19). It frequently affects the spine and the hip, knee and shoulder joints, among others (1, 6, 12). Fifty percent of these forms are associated with pulmonary infection (1, 14, 15).

Location in the ischiopubic ramus is rare (11) but is more frequent in children (15). According to the patient's age, a differential diagnosis with primary bone neoplasm or metastasis should initially be made (9, 11). The work-up must also rule out ischial osteitis (1, 5), osteochondritis in adolescents, lesions of the pubic symphysis in athletes and postpartum infection in women (10).

Different guidelines of treatment are described from the published reports (10, 16): 1) bone graft plus antituberculous drugs (2); 2) bone curettage plus antituberculous therapy (16) and 3) tuberculous drug therapy alone (8, 15).

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### SAMENVATTING

*S. GARCÍA, J. M. SEGUR, A. COMBALÍA. Tuberculose van het ischium.*

Tuberculose komt nog frekwent voor in ontwikkelingslanden. Bottuberculose is zeldzamer dan de longaantasting. De auteurs beschrijven één geval van tuber-

culose van het ischium. De behandeling met curettage en antibiotica gaf een goed resultaat.

### RÉSUMÉ

*S. GARCÍA, J. M. SEGUR, A. COMBALÍA. Tuberculose de l'ischion.*

La tuberculose reste fréquente dans certaines régions

en voie de développement. La tuberculose ostéo-articulaire est moins fréquente que la forme pulmonaire. Les auteurs présentent un cas de tuberculose de l'ischion. Le traitement par simple curettage, associé à l'antibiothérapie, fut suivi d'un bon résultat.