

European Respiratory Society Annual Congress 2013

Abstract Number: 2479

Publication Number: P2802

Abstract Group: 10.2. Tuberculosis

Keyword 1: Extrapulmonary impact **Keyword 2:** Treatments **Keyword 3:** Tuberculosis - management

Title: Short term outcome of isolated tuberculous lymphadenitis (TBL); a series of 152 cases

Dr. Dushantha 23840 Madegedara dmadegedara@yahoo.com MD ¹, Dr. Manjula 23841 Weerakoon manjulaweerakoon2@gmail.com MD ¹, Dr. Duminda 23842 Yasaratne yasaratne@yahoo.com MD ¹, Dr. Damith 23843 Nandadeva d.nandadeva@gmail.com MD ¹ and Dr. Hansa 23844 Kumara hansa.medpera@gmail.com MD ¹. ¹ Respiratory Medicine, Teaching Hospital, Kandy, Sri Lanka, 20000 .

Body: Aim To assess the short-term outcome of TBL, in an endemic setting with intermediate disease burden. Setting Respiratory Unit II, Kandy, Sri Lanka. Methodology A descriptive case series from TB registry, Jan 2008 - Dec 2011. Results Out of total 3410 TB patients, 933 (27%) were extrapulmonary. 152 (86 females; mean age 36.0 years) had isolated lymphadenitis. Cervical nodes were the commonest involved in 79%. 144 had histological and/or microbiological confirmation, while 8 were treated on strong clinical grounds. 49 (34%) of confirmed cases did not respond to initial six month course of category I anti-tuberculous treatment (ATT), but all responded to prolonged or alternative therapy. Some of them required category II ATT, while repeat LN biopsy showed coexisting fungal & atypical mycobacterial disease in a few. Five with large residual nodes had them surgically excised. Among the empirically treated cases, alternative or coexisting diagnoses including malignancy and lymphoma, were made in 5 (62%) on early reassessment.

All were HIV negative and drug resistance not identified in the group. Only 9 developed major adverse reactions (hepatitis 8, vestibular neuronitis 1) to ATT. Conclusion TBL showed a varying response to a six month course of category I ATT. One third of confirmed cases warranted treatment modifications for good response in our setting. Majority of empirically treated cases had alternative diagnoses.