

12th World Cancer Conference

September 26-28, 2016 London, UK

BCG-osis following intravesical BCG treatment leading to miliary pulmonary nodules, penile granulomas and a mycotic aortic aneurysm

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A 69 year old man, who was treated with intravesical BCG for carcinoma in-situ of the bladder, went on to develop systemic features of BCG-osis. This diagnosis was supported by significant radiological and clinical findings. These systemic features include pulmonary miliary lesions, a mycotic abdominal aortic aneurysm and penile lesions. The relationship between the patient and the NHS has broken down somewhat and as a result the patient has declined BCG treatment. This case report highlights the potential rare side effects of intravesical BCG treatment and the risk associated with non-treatment of BCG-osis. Offering patients information on rare but serious complications associated with treatment is essential to ensure future compliance with treatments. Specifically, offering patients undergoing intravesical BCG treatment information on BCG-osis is advised. BCG-osis diagnosis can be made using clinical and radiological findings in the presence of a negative AAFB screen (potentially signifying a non-active infection).

Biography

David M Smith has completed his MBBS from Hull York Medical School. He holds a Bachelor's degree in Genetics from Leeds University and Master's degrees in Forensic Science and Medical Physics from Sheffield Hallam University and the Open University, respectively. He is currently a Foundation Doctor working at the National Health Service with aspirations of becoming an academic clinical oncologist.

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