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Letter to Editor Open Access

Osteitis Cystica Tuberculosa Multiplex

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Letter to Editor

35 year old Indian male presented with 3 months history of productive cough, low grade fever, weight loss, night sweats and joint pain. On examination patient was febrile and emaciated. He had swelling and tenderness in bilateral midfoot region and right knee. Chest examination revealed crackles in bilateral lung apex and left lung base. His investigation showed elevated acute phase reactants, sputum sample for Acid Fast Bacilli (AFB) was positive. Chest radiograph showed features of bilateral upper lobe fibrosis and osteolytic lesion with sclerosis involving distal aspect of 9th and 10th rib (Figure 1A). Radiograph of both feet showed soft tissue swelling, minimal periosteal reaction, osteolysis with little or no reactive change, periarticular osteoporosis, and erosions (Figure 1B). There was similar radiographic finding in right knee (Figure 1C). Patient underwent biopsy from left midfoot, which grew mycobacterium tuberculosis.

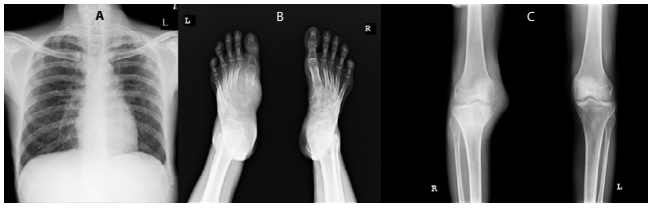

Figure 1: (a) Osteolytic lesion with sclerosis involving distal aspect of 9th and 10th rib. (b) Soft tissue swelling, minimal periosteal reaction, osteolysis with little or no reactive change, periarticular osteoporosis, and erosions. (c) Similar radiographic finding in right knee.

Tubercular osteomyelitis, an uncommon form of extrapulmonary tuberculosis (TB), accounts for 1% to 2% of all cases of TB and 10% of all cases of extrapulmonary TB [1]. Multifocal tuberculous osteomyelitis is also known as osteitis cystica tuberculosa multiplex. The multifocal skeletal form of tuberculosis is exceptional even in endemic countries, representing less than 5 percent of all bony tuberculosis [2]. Multiple sites of involvement are usually seen in children, while in adults, involvement is more often confined to a single bone. Tuberculosis with multiple bone involvement is exceedingly rare in non-immunocompromised patients. Intercurrent active pulmonary TB is only seen in about one half of the patients [3]. Also, very few cases of skeletal TB involve ribs [4]. This case represents an amalgam of multiple manifestations of common disease.

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