

A Retrospective Analysis of Clinical Profile of Abdominal Tuberculosis

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ABSTRACT

Objective: Analysis of the clinical profile of patient presented with abdominal tuberculosis.

Study Design: Retrospective study.

Materials and Methods: The study was conducted at SIMS Hapur & Govt. Medical College Saharanpur between January 2016 to Dec' 2017. A total of 56 patients were enrolled. All demographic data and clinical profile were collected.

Results: A total of 56 patient were found, out of which male and Female were 33(58.92%) and 23 (41.08%) respectively. Most common age affected by abdominal tuberculosis was 21 to 40 Years. Regarding symptoms abdominal pain, vomiting, loss of appetite and weight loss were the presenting symptoms in 44 (78.57%), 42 (75%), 38 (67.86%) and 29 (51.79%) respectively. Regarding clinical sign at the time of presentation, pallor, abdominal tenderness and abdominal distension were present in 41(73.21%), 29(51.79%) and 22(39.29%) respectively. Regarding diagnosis, biopsy is the gold standard for diagnosis of tuberculosis, so biopsies were taken by various means. The endoscopic, laparoscopic, laparotomy biopsies were taken in 13(23.21%), 17(30.36%), 10(17.86%) of patients

respectively. Image guided Biopsy and Ascitic fluid analysis was done in 6(10.71%) and 10(17.86%) of patients.

Conclusion: Abdominal TB constitutes a major health problem in developing & poor countries. Abdominal TB is very difficult to diagnosis. A high index of suspicion picks the patient early, if diagnostic delayed present as acute abdomen.

Keywords: Abdominal Tuberculosis, Pain, Vomiting, Biopsies.


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INTRODUCTION

Tuberculosis is a communicable disease caused by Acid fast bacilli, mycobacterium tuberculi. Tuberculosis is one of the major public health problem of developing countries.¹ TB can affect almost any organ of the body but, most common presentation is pulmonary TB although extra pulmonary TB is not rare. In extra pulmonary TB, the most common sites are lymph nodes, Abdomen, Bones, Joints and CNS. In Abdomen it may affect GIT, peritoneum, mesenteric lymph nodes & solid viscera.² Approximately 1-3% of total TB cases are extra pulmonary³, of these Abdomen tuberculosis accounts for 11-16%.⁴ In Abdominal TB, the symptoms & signs are nonspecific so majority of patients present late with complications.⁵ The most common symptoms are generalized or localized pain, weight loss, night sweats fever, vomiting, diarrhea and constipation. The Abdominal TB many manifest as late complications in the form of small bowel obstruction or perforation.⁶ These complications of Abdominal TB requires prompt surgical interventions followed by Antitubercular therapy.⁷ The most common site affected is ileo-cecal region & perforations are usually single & proximal to a stricture.⁸

MATERIALS & METHODS

This is a retrospective study conducted at SIMS Anwarpur Hapur & Govt. Medical College Saharanpur between Jan 2016 to Dec 2016. A total of 56 patient were found with diagnosis of Abdominal TB by records. All demographic data were collected in the form of age, sex, clinical findings. Investigation in the form of CBC, ESR, KFT MTx test, x-ray chest, Abdomen and USG Abdomen were obtained.

RESULTS

A total of 56 patient were found, out of which male and Female were 33(58.92%) and 23 (41.08%) respectively. Most common age affected by abdominal tuberculosis was 21 to 40 Years. Regarding symptoms abdominal pain, vomiting, loss of appetite and weight loss were the presenting symptoms in 44 (78.57%), 42 (75%), 38 (67.86%) and 29 (51.79%) respectively. Fever was the presenting symptom in 22(39.29%) of patient. Regarding clinical sign at the time of presentation, pallor, abdominal tenderness and abdominal distension were present in 41(73.21%), 29(51.79%)

and 22(39.29%) respectively. Ascites and abdominal lump was found in 11(19.64 %) and 6(10.71%) of patients. Regarding diagnosis, biopsy is the gold standard for diagnosis of tuberculosis, so biopsies were taken by various means. The endoscopic, laparoscopic, laparotomy biopsies were taken in 13(23.21%), 17(30.36%), 10(17.86%) of patients respectively. Image guided Biopsy and Ascitic fluid analysis was done in 6(10.71%) and 10(17.86%) of patients.

Table I: Age and gender wise distribution

Age (Years)	Male		Female		Total	
	(N)	%	(N)	%	(N)	%
10-20,	3	9.09	5	21.74	8	14.29
21-30,	10	30.3	6	26.09	16	28.57
31-40,	10	30.3	5	21.74	15	26.79
41-50	6	18.18	4	17.39	10	17.86
51-60	4	12.12	3	13.04	7	12.5
	33	100	23	100	56	100

Table II: Presenting Symptoms

Symptoms	Patients	
	(N)	%
Abdominal Pain	44	78.57
Weight loss	29	51.79
Loss of Appetite	38	67.86
Vomiting	42	75
Constipation/Diarrhea	29	51.79
Fever	22	39.29

Table III: Distribution of patients according to Biopsy

Type of biopsy	Patients	
	(N)	%
Endoscopic Biopsy	13	23.21
Laparoscopic biopsy	17	30.36
Laparotomy and biopsy	10	17.86
Ascitic fluid analysis	10	17.86
Image guided Biopsy	6	10.71

Table IV: Distribution of patients according to Clinical Sign at presentation

Clinical Sign at presentation	Patients	
	(N)	%
Pallor	41	73.21
Abdominal distension	22	39.29
Abdominal tenderness	29	51.79
abdominal lump	6	10.71
Ascites	11	19.64

DISCUSSION

Abdominal TB is a major health concern in developing countries & associated with significant morbidity & mortality.⁹ Abdominal TB can effects any age group but is more common in young people. In our study majority of patients (55.36 %) were in the age group

of 21-40 Year which is in accordance with the result of other workers.¹⁰ In our study males were slightly more affected than females which is comparable with the other studies^{11,12} But some studies reports that Abdominal TB is more common in females.¹³ According to symptoms, in our study most common symptoms were Abdominal Pain 44 (78.57%), Vomiting 42(75%), loss of Appetite 38(67.86%) weight loss 29(51.79%). Other common symptoms were constipation/ Diarrhea, and fever were found in 29 (51.79%) and 22(39.29%) respectively. Our results are comparable to other study.¹⁴

Regarding clinical signs at the time of presentation, Pallor 41(73.29%). Abdominal tenderness 29(51.79%) Abdominal distention 22(39.29%) & Abdominal Lump 6(10.7%) Ascites 11(19.64%) were the common signs. These findings are comparable to other studies.^{15,16}

In our study diagnosis was established by either histopathologically or Ascitic fluid analysis. The findings of these two were as follows:-Endoscopic Biopsy 13(23.21%) Laparoscopic Biopsy 17(30.36%). These findings are comparable to other study.¹⁶

CONCLUSION

Abdominal TB constitutes a major health problem in developing & poor countries. Abdominal TB is very difficult to diagnosis. A high index of suspicion picks the patient early, if diagnostic delayed present as acute abdomen.

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