AN ABSCESS ON THE CHEST WALL
SMALL GROUP PAEDIATRIC DIETETIC SESSIONS FOR
Mycobacterium tuberculosis

amount of pus was drained. A post-biopsy chest X-ray
nancy. This revealed a fluid filled centre and a significant
The patient underwent a diagnostic biopsy to exclude malig-
into the underlying 8th rib and a left hilar nodal shadow
left 8th and 9th ribs, associated with an enlarged left supracla-
On examination she had a 6 cm × 4 cm mass overlying the
intermittent fever over the preceding 2 weeks. There were no
Case history A 15 year old Bangladeshi girl presented to us
with a 2 month history of progressively increasing mass on
the chest wall mass as the first presenting feature of
tuberculosis.

Musculoskeletal tuberculosis (TB) occurs in 1%–3% of patients with the disease. However cold abscess of the chest wall is rare and constitutes 1% to 5% of all cases of musculoskeletal TB. Moreover it is only described in cases of severe or disseminated form of the disease and not as the first presenting feature. Patients are often young and have no comorbidity. Diagnosis is often delayed because of the atypical presentation and lack of awareness. We describe a case of anterior chest wall mass as the first presenting feature of tuberculous.

The patient underwent a diagnostic biopsy to exclude malignancy. This revealed a fluid filled centre and a significant amount of pus was drained. A post-biopsy chest X-ray showed a markedly enlarged pleural effusion. The patient’s Quantiferon test was positive (16.05 IU/ml). The fluid was sent for culture and sensitivity and this confirmed drug sensitive Mycobacterium tuberculosis. The patient was treated with standard Anti-Tubercular Therapy and had an uneventful recovery.

Conclusion Tuberculosis is a great masquerader and atypical presentations are known to occur. TB should be considered in children presenting with a chest wall mass even if they have been vaccinated with BCG. Other differential diagnoses include benign and malignant tumours. Prompt diagnosis and treatment of chest wall TB results in complete recovery and helps in preventing serious complications.