Extrapulmonary tuberculosis: Challenges in diagnosis and Management

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Although the global incidence of tuberculosis (TB) and TB deaths is slowly declining, TB is still a formidable public health challenge. According to recent data released by the World Health Organization (WHO), an estimated 10 million new active TB diseases cases and ~ 1.41 million deaths occurred in 2019, making TB one of the top 10 causes of death worldwide and the leading cause of death from a single infectious agent. Tuberculosis can involve any organ system in the body. While pulmonary tuberculosis is the most common presentation, extrapulmonary tuberculosis (EPTB) is also an important clinical problem. EPTB accounts for ~ 15% of all TB cases worldwide. Nevertheless, the diagnosis is often delayed or even missed due to insidious clinical presentation and poor performance of diagnostic tests. Culture, the classical gold standard for tuberculosis, suffers from increased technical and logistical constraints in EPTB cases. Management of EPTB is challenging and variable. The disease usually responds to standard antituberculosis drug treatment. Biopsy and/or surgery is required to procure tissue samples for diagnosis and for managing complications. Further research is required for evolving the most suitable treatment regimens, optimal duration of treatment and safety when used with highly active antiretroviral treatment (HAART).