

中文題目：肺結核病患服用抗結核藥物之逆向反應- 個案報告

英文題目：A case of pulmonary tuberculosis with paradoxical reaction during anti-tuberculosis therapy

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Introduction: A tuberculosis (TB) paradoxical reaction (PR) is defined as the inflammatory response following initial improvement with anti-TB treatment.

Immunocompromised status has been recognized a risk factor for PR, we herein presented a 23-year-old female with pulmonary TB who suffered from paradoxical worsening of neck lymphadenitis during anti-TB treatment.

Case presentation: A 23 years old non-immunocompromised female was diagnosed as pulmonary TB and received anti-TB treatment with HERZ. Her clinical symptoms and radiographic findings improved initially, but right neck lymph nodes enlarged after 3 months of therapy. Neck computed tomography revealed several right necrolytic lymph nodes enlarged with extracapsular invasion at right level IIA, IIB, III and IV (largest at right IIA, 2.5 cm). Steroids was then prescribed for one month, but the lymphadenopathy progressed. She finally received surgical resection of right neck lymph nodes and the pathological report was positive for acid-fast bacilli and polymerase chain reaction test for TB. Patient was continued on anti-TB treatment after surgery, and no evidence of relapse of PR during follow-up.

Discussion: Paradoxical reaction has been observed in 20 ~ 30% of all patients receiving anti-TB therapy, which is usually a mild, transient, and self-limited phenomenon. There's still lacking of standard treatment strategy, we shared our clinical experience of management of PR in a non-immunocompromised patient.