

中文題目：結核性腸炎

英文題目：Tuberculous enteritis : A case report

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We report a case of 34 year-old male who suffered from intermittent abdominal pain, vomiting episodes few months. Tracing back his history, he was victim of tuberculosis before and he had gastrointestinal symptoms, including nausea, poor appetite and abdominal pain and poor appetite since few months ago, He visited our outpatient department for further survey.

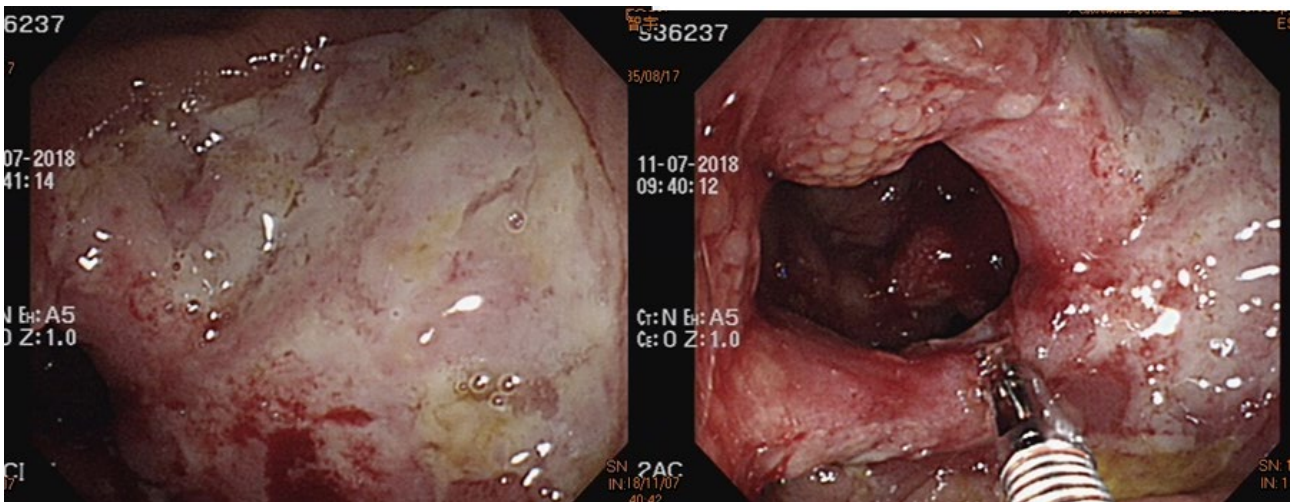
The initial laboratory data revealed leucopenia ($1.9 \times 10^3/\mu\text{L}$) and iron deficiency anemia (Hb:12.6 MCV: 73.1 ,Fe :32 ,TIBC:225). The plain abdomen showed negative finding (figure 1). We arrange EGD and colonoscopy due to iron deficiency anemia and abdominal pain .EGD showed negative finding expect HP infection .Colonoscopy showed the swollen and ulcerative ileocecal valve (figure 2). TB enteritis was suspected but the pathology of biopsy showed ulcer only. Unfortunately, his symptoms was still persistent and we arrange 2nd colonoscopy three months later and pathology of biops still showed ulcer only. Later, he received abdominal computer tomography (CT) survey and it showed small bowel wall thickening, including ileocecal valve (figure 3) .We arrange 3rd colonoscopy six months later and 3rd colonoscopy showed multiple deep ulcer from A-colon to D-colon (figure 4) and pathology of biopsy showed ulcer with mycobacteria infection. Under the impression of pulmonary TB and TB enteritis, she started anti-TB medication treatment.

Discussion

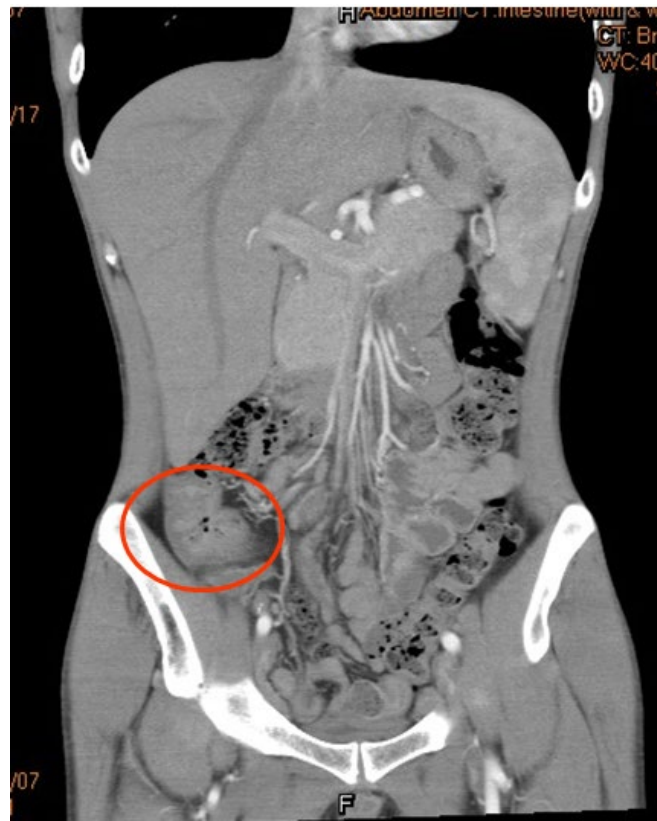
TB enteritis accounts for 1 to 3 percent of TB infection worldwide and it represents the sixth most frequent form of extra-pulmonary TB [1]. TB enteritis is a rare sequela, occurring in less than 1 per cent of pulmonary tuberculosis [2]. Intestinal TB mainly invades the ileo-cecal area, with presentation of concentric ulcer with swollen mucosa in colonoscopic image, and symmetric mural thickening in CT image. However, any part of gastrointestinal tract can be involved by TB infection, and skip lesions are not uncommon. Therefore, it must be differentiated from the inflammatory bowel disease, especially the Crohn's disease[3,4]. The symptoms of TB enteritis are nonspecific, such as the abdominal fullness and pain, anorexia and body weight loss. The most common complication is obstruction from narrowing of the lumen because of swollen mucosa, or adhesions or strictures as chronic infection sequel. In conclusion, we reported a case of TB enteritis. The untypical presentations highlight the importance of prompt diagnosis, especially in the area with high prevalence of TB infection.



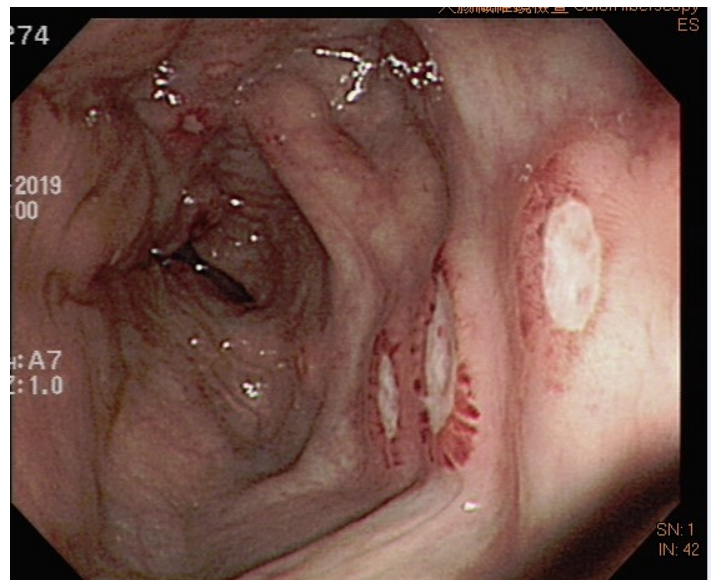
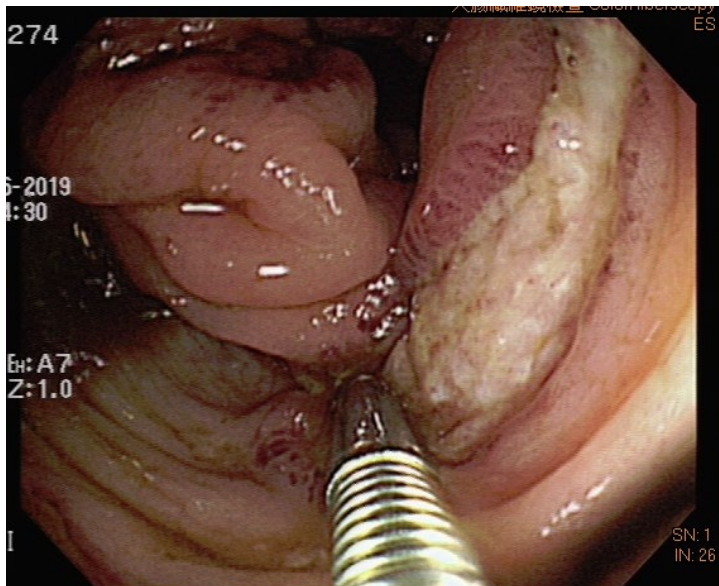
(figure 1)



(figure 2)



(figure 3)



(Figure 4)