# **CASE REPORT**

## A RARE CASE OF TUBERCULAR EMPYEMA NECESSITANS

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#### **HOW TO CITE THIS ARTICLE:**

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**INTRODUCTION: AIMS:** we describe a rare case of tubercular empyema necessitans managed at our hospital KIMS Hubli Dec, 2011, and to perform discussion about this topic.

**METHODS AND RESULT**: A 67 years male patient presented with swelling over right chest since two months. X-ray chest showed right sided massive pleural collection and then USG of chest was done which showed a connection between chest wall swelling and pleural cavity which clinched the diagnosis of empyema necessitans. Pleural fluid was aspirated sent for culture and biochemical test, which showed low glucose, high protein and no pus cells, Z-N staining was negative. Then ADA was sent and found positive. Diagnosis of tubercular empyema necessitans was made and started on ATT. ICD was inserted, collection was drained and the chest wall swelling started to shrink, after two weeks total disappearance of swelling.<sup>1</sup>

**MESSAGE:** Swelling over chest wall with no constitutional symptoms and without cough impulse one should keep diagnosis of empyema necessitans and can be due to tuberculosis and respond well to treatment and potential mortality can be reduced. Empyema necessitans is an uncommon complication of empyema, first modern review of this entity was a description of 115 cases by Sindel in 1940.<sup>2,3</sup>

#### REFERENCES:

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- 2. Ayik S. et al; empyema nessistans, American chest journal, Oct 2010, vol 138, no-4.
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BEFORE TREATMENT CHEST WALL LESION



## AFTER TREATMENT WITH ATT AND CHEST DRAIN

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