

간경화를 가진 혈액 투석 환자에서 동시에 발생한 결핵성 말초 림프절염과 결핵성 간농양

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Simultaneous Peripheral Tuberculous Lymphadenitis and Tuberculous Liver Abscess in a Patient with Liver Cirrhosis on Hemodialysis

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Introduction : Medical condition such as diabetes, chronic renal failure and immunosuppressant patients has been related with tuberculosis. The incidence of tuberculosis in patients with end-stage renal disease is more common than general population because of decreased cellular immunity. But simultaneous peripheral tuberculous lymphadenitis and tuberculous liver abscess is a rare condition.

Case : A 64-year-old woman was admitted to our hospital with fever and right supraclavicular mass. She had been treated with fever in local for two weeks before admission. Colonoscopy was carried out in local clinic demonstrated no specific finding. The patient with hepatitis C-related liver cirrhosis had been treated with hemodialysis for seven years because of hypertensive nephropathy. Physical examination showed enlargement of right supraclavicular lymph node. Chest radiography was unremarkable. Laboratory tests revealed white blood cell count 3,760 cells/mm³, Hemoglobin 8.2 g/dL, platelet 131,000 cells/mm³, total bilirubin 0.3 mg/dL, alkaline phosphatase 81 U/L, SGOT 23 U/L, SGPT 14 U/L, ESR 38 mm/hr and CRP 13.8 mg/L. Histopathologic examination of excisional biopsy performed on right supraclavicular lymph node revealed chronic granulomatous inflammation with consistent tuberculosis. Sonography and computed tomography were conducted for evaluation of the liver cirrhosis and showed several cystic and ring enhancing nodule in the liver. Ultrasound-guided needle biopsy on the cystic nodule of the liver was carried out. The result of histopathologic examination of the specimen was chronic granulomatous inflammation with caseation necrosis. The patient was treated with anti-tuberculosis drugs and was improved clinically. The patient was followed by sonography after one month later. The size of tuberculous abscess in the liver was somewhat diminished on compared with previous computed tomography.

Conclusion : Most liver tuberculoma and abscess are accompany with pulmonary tuberculosis or intestinal tuberculosis. In this case, there was no evidence of pulmonary or intestinal tuberculosis in the chest radiograph, abdominal computed tomography and colonoscopy. We should be aware of the possibility of other extrapulmonary tuberculosis in patients with peripheral tuberculous lymphadenitis on hemodialysis.

Key Words : 결핵성 림프절염, 간농양, 혈액 투석

Tuberculous lymphadenitis, Liver abscess, Hemodialysis