

عنوان مقاله:

Primary tubercular sialadenitis – A diagnostic dilemma

محل انتشار:

مجله علمی گوش و حلق و بینی ایران، دوره 31، شماره 1 (سال: 1398)

تعداد صفحات اصل مقاله: 6

نویسندگان:

Nitish Virmani - *Department of Otorhinolaryngology and Head-Neck Surgery, Dr. Baba Saheb Ambedkar Hospital, Delhi, India*

Jyoti Dabholkar - *Department of Otorhinolaryngology and Head-Neck Surgery, Seth G.S Medical College and KEM Hospital*

خلاصه مقاله:

Introduction: Involvement of the salivary glands in tuberculosis is rare, even in countries where tuberculosis is endemic. It can occur by systemic dissemination from a distant focus or, less commonly, as primary involvement. This article focuses on its myriad clinical presentations that pose a diagnostic challenge to the clinician. We discuss the schema of investigations required to confirm the diagnosis and the limitations faced in the low-cost setting of a developing country. **Materials and Methods:** Medical records, including history, physical examination and imaging findings, and the results of cytological, microbiological and histopathological studies of patients diagnosed with primary tubercular sialadenitis were retrieved and analyzed. **Results:** Seven patients were treated over a 2-year period. The most common mode of presentation was a painless mass of the involved gland in four patients. One patient each presented with chronic non-obstructive sialadenitis, sialolithiasis, and acute suppurative sialadenitis. Fine needle aspiration cytology was diagnostic in five out of seven cases (71.4%), while mycobacterial culture was positive in two patients (28.6%). In one patient, a diagnosis could only be reached on histopathological examination of the resected gland. **Conclusion:** We recommend cytology studies, acid-fast bacilli staining, and mycobacterial culture as the initial investigation on the aspirate in suspected patients, while polymerase chain reaction should be reserved for negative cases. A high index of suspicion, early diagnosis, and timely institution of anti-tuberculosis treatment is essential for establishing cure. The role of surgery in diagnosed cases of tuberculosis is limited.

کلمات کلیدی:

Parotid gland, Sialadenitis, Tuberculosis, submandibular gland, Salivary gland calculi, Salivary fistula

لینک ثابت مقاله در پایگاه سیویلیکا:

<https://civilica.com/doc/887246>

