

INFECTIOUS DISEASES (BACTERIAL, FUNGAL, VIRAL, PARASITIC, INFESTATIONS)

CUTANEOUS TUBERCULOSIS IN TUNISIA: A RETROSPECTIVE STUDY OF 27 YEARS

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Introduction: Tuberculosis is endemic in Tunisia. The most common presentation in our country is pulmonary tuberculosis. Cutaneous tuberculosis (CT) is however rare. The diagnosis of CT can be challenging due to clinical polymorphism.

Objective: The purpose of the study was to outline the epidemiological and clinical features of CT in Tunisia.

Materials and Methods: We conducted a retrospective study including all cases of CT in the dermatology department of Charles Nicolle Hospital, Tunis over a period of 27 years (1991-2018). Cases of BCGitis, tuberculids and Erythema Induratum of Bazin were excluded from this study.

Results: Fifty-one patients were included (30 females and 21 males). The average age was 44 years (ranging from 9 to 92 years). The majority of patients (98%) lived in low-income rural areas. BCG vaccination was found in 74% of cases. All patients were HIV negative. The mean diagnosis delay was 26 months. Scrofuloderma was the most frequent form (27 cases), followed by lupus vulgaris (14 cases), tuberculous gumma (6 cases), verrucous tuberculosis (3 cases) and lichen scrofulosorum (1 case). A concomitant visceral localization was found in 17 cases: pleuropulmonary in 7 cases, lymph node in 6 cases, and osteoarticular in 4 cases. Antibiotics were prescribed in 45 patients. Side effects were noted in 38.2% of cases. Remission was complete in 27 cases and partial in 10 cases. Sequelae were observed in 72% of cases consisting of retractile or hypertrophic scars. Relapses related to poor compliance were noted in 4 patients and related to resistance to treatment in one patient.

Conclusions: The clinical polymorphism of CT, the different histological aspects, and the poor efficacy of microbiological examinations make them difficult to diagnose. The response to treatment is satisfactory but unaesthetic scars are frequently observed. Relapses are not uncommon and expose to the emergence of resistance to treatment.





