

SOFT TISSUE TUBERCULOSIS HYPOTHENAR OF THE HAND

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Introduction: Soft tissue tuberculosis of the upper extremity tuberculosis is uncommon and furthermore the mycobacterial involvement of skin of hands and synovial sheath of tendons is rare.

Discussion: This is an ongoing study of a 48 year old housewife, Right hand dominant with no history of previous medical illnesses. She presented with a gradual increasing in size of swelling over the ulna border volar aspect of the wrist which progressively increased in size at the hypothenar region of the right palm for the past 4 years. She denies any history of trauma or infection preceding the swelling. She does not have any constitutional symptoms and does not have any infective signs. She has slight reduce in sensation over the distal ulna nerve distribution. She denies any pain and her daily activities are not disturbed by the swelling. The swelling is soft in consistency with ill-defined borders, no overlying skin changes. It is not tender on palpation. Mantoux test was inconclusive. A plain radiograph xrays on the wrist and hand showed shadows of soft tissue swelling and mild Lytic changes and erosion involving the hamate bone. The rest of the carpal bones were normal. She had undergone an MRI in November 2018. A multiloculated collection at the palmar aspect right wrist which extends and involve the Thenar and Hypothenar region. With the provisional diagnosis of possible Tuberculosis soft tissue infection of the Right palmar and wrist region. She is planned for a tru-cut biopsy to rule out Tumour.

Conclusion: Predominant findings of complex collection, diffuse tenosynovial thickening and peritendonous fluid involve the flexor compartment of the wrist in favour of tuberculous infection. Marrow changes of Hamate and Triquetrium indicating spread of infection (osteomyelitis).