

## **ANKLE TUBERCULOSIS IN INFANCY: A NIGHTMARE IN DIAGNOSING, A CONFLICT IN TREATING**

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**Introduction:** Tuberculosis (TB) remains one of the major health hazard in developing countries. Musculoskeletal TB accounts for less than 3 percent of all extra-pulmonary presentations<sup>1</sup>. Here we present a rare case of ankle TB in infancy.

**Discussion:** A 7-month old baby refused to weight bear on his leg for 1 week duration. Thorough examination revealed right ankle effusion. Radiograph showed lytic lesion over right lateral malleolus, suspicious of osteomyelitis. Ultrasonography then showed 1.1x1.8x0.9cm collection with erosion over lateral malleolus. Biochemical parameters remained normal. Patient completed 6-week course of intravenous cloxacillin, however swelling persisted. Patient then underwent incision and drainage. Intraoperatively, there was presence of granulomatous tissue with destruction of lateral malleolus cortex but no pus. Mycobacterium tuberculosis complex detected in tissue culture. Consensus was made with paediatrician not to start anti-TB and to observe clinically. Within 1 year of follow up, the ankle swelling gradually resolved and patient was able to weight bear normally. Of all musculoskeletal TB cases reported, only 10 percent comprises of ankle and foot TB (AFTB). It may present as unresolved swelling, with radiograph showing wide spectrum of findings from osteoporotic bones to lytic lesions. This misleads physicians in achieving diagnosis as it may mimic osteomyelitis and malignancy. If no clinical improvement attained despite intravenous antibiotics, physicians should have high index of suspicion for TB. A delayed diagnosis leads to delay in treatment, causing irreversible articular damage. Most literatures recommend treating AFTB with early anti-TB drugs, however no guideline proposes standard regime duration. The risk of initiating the anti-TB drugs in infant group patients remain controversial.

**Conclusion:** Despite its low incidence, AFTB should remain a probable diagnosis for chronic unresolved lower limb swelling. Multidisciplinary approach should be established early in order not to delay diagnosis and determine the best course of treatment.