

SPINE METASTASES? NO, IT IS SPINE TUBERCULOSIS

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Introduction: Spine tuberculosis (TB) and spine metastases are two commonly cases that are difficult to diagnose especially when there are limited manifestations or presentations. Both are typically developed lesion in the spine and yet hard to differentiate. the two cases lead to different stream of treatments.

Discussion: 21 years old young lady came to our centre with spontaneous progressive neck pain and bilateral upper limb weakness since the past 6 months. She had no other constitutional symptoms apart from significant weight loss. Her neurology was ASIA D para paresis level T2 with sacral sparing. Other significant physical examination revealed a diffuse non mobile thyroid mass measuring 3x3 cm. X-ray cervical showed reduced vertebral body height of T1 and T2 with loss of their pedicles resulting acute kyphotic deformity at cervical - thoracic junction. Magnetic resonance imaging (MRI) T2 weighted demonstrated heterogenous lesion of T1-T3 and destruction of T2 vertebral body with extension into the spinal canal causing narrowing of spinal canal. However, the ultrasound came out negative for any suspicious thyroid nodule and supported with normal thyroid stimulating hormone (TSH) result. Other inflammatory markers raised and some of the tumour markers sent were not available. Contemplating these findings and investigations, we were quite convinced the pathology was spine metastasis with unknown origin. Operation decompression and posterior instrumentation was set up and performed. Astonishingly, the bone tissue histopathological examination came back with findings of chronic granulomatous inflammation which suggested tuberculosis infection 3 weeks later. She was immediately started anti tuberculosis medication. At present she is recovering from her illness with residual bilateral upper limb hyperreflexia and without neurological deficit.

Conclusion: With the imaging technology advancement nowadays, invasive investigation such as tissue biopsy is still the gold standard in distinguishing tuberculous infection and metastases.