## A RARE CASE OF EXTRAPULMONARY TUBERCULOSIS OF THE THUMB WHICH MIMICS OSTEOMYELITIS CHANGES: A CASE REPORT

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**Introduction:** The most common extrapulmonary tuberculosis is skeletal tuberculosis (TB), in which involvement of metacarpals and phalanges are extremely rare reported about 10%. Skeletal tuberculosis is extremely difficult to diagnose and often radiological and clinical pictures may mimic other pathologies such as chronic suppurative osteomyelitis or malignancies.1,2,3 We report a case of 72 years old lady with rare presentation of tuberculosis of the thumb without any trivial injury or prodromal symptoms.

**Discussion:** 72 year old lady presented with left thumb swelling gradually increasing in size and pain for 2 months with no history of trauma, insect bites or constitutional symptoms such as weight loss, prolonged fever or cough, lethargy and night sweats. Patient was given multiple courses of antibiotics however pain and swelling didn't subsided. On examination left thumb revealed an oedematous swelling with decrease range of motion over the metacarpophalangeal and proximal interphalangeal joints with diffuse tenderness. There was no wound or discharges seen and warmth to touch. Xray revealed significant soft tissue swelling over the left thumb proximal phalanx with periosteal reaction noted circumferentially with lytic lesion and cortical irregularity seen which mimics osteomyelitis changes. Biopsy was arranged and histopathology results reveals granulomatous inflammation and acid fast bacilli detected in tissue specimen which was suggestive of tuberculosis infection. The patient was treated with wound care and night splint. She was also initiated with four drugs anti-tuberculous chemotherapy. At four months of follow up, noted the swelling and pain much decreased and range of motion over the metacarpal-phalangeal and interphalangeal joints also improved remarkably.

**Conclusion:** Therefore, in area of endemic patient presented with atypical symptoms and radiological features. Prompt biopsy and initiation of antituberculous chemotheraphy is important to prevent future complication such as chronic discharging sinus and bony peri articular erosions that would affects the functional status of the hand.