

Coexistence of Tuberculosis and Malignancy in a Single Lymph Node as a Diagnosis Challenge

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ABSTRACT

The coexistence of tuberculosis and malignancy in the same lymph node is very uncommon. The purpose of this article was to discuss, through our cases, clinical features and treatment options of this condition.

We conducted a retrospective study including cases of concomitant tuberculosis and malignancy within the same cervical lymph node treated at our ENT department of the Military Hospital of Tunisia between 2008 and 2022.

The study included ten patients. Their mean age was 47 years. They received or were receiving treatment for cancer or tuberculosis in seven cases. All patients presented with recurrent c or new lymph nodes despite being under treatment. The three remaining patients had no history of cancer or tuberculosis.

The histopathological exam confirmed the coexistence of tuberculosis and malignancy within the same lymph node. Histological types of the diagnosed cancers included: laryngeal squamous cell carcinoma, papillary thyroid carcinoma, nasopharyngeal carcinoma, medullary carcinoma of the thyroid gland, Hodgkin lymphoma, non-Hodgkin lymphoma and diffuse large B cell lymphoma. All patients received treatment for tuberculosis and cancer. Average duration of antituberculosis treatment was seven months. Two patients were dead because septic complication in one case and for pulmonary complication due to miliary tuberculosis in one case.

Concomitant tuberculosis and malignancy are possible, especially in countries with high tuberculosis incidence. Therefore, a detailed histopathological examination is required to prevent misdiagnosis. Immunocompromised states related to cancer and its treatments can add the risk of flare-up of a latent infection.

Keywords: Tuberculosis, Lymph nodes, Malignancy, Histopathology exam

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