

## HEAD AND NECK PRIMARY TUBERCULOSIS: REPORT OF TWO CASES.

POIRRIER AL., DENEZ P., MOREAU P.

ENT Department, University Hospital, B-4000 Liege, Belgium.

Introduction: Tuberculosis is known to cause caseating granuloma that usually attacks the lungs, but can attack almost any part of the body. Although primary involvement of the head and neck sites is rare, tuberculosis can present to an ENT clinician as a difficult diagnostic dilemma. This report documents 2 cases of primary tuberculosis involving the head and neck region.

Case report 1: An 82 year-old woman presented a left neck mass without hoarseness or dysphagia. There was no history of immunodepression, and no history of tobacco or alcohol abuse. Computed tomography showed multiple necrotising nodular lesions. A first biopsy was not contributive. An elective neck dissection was performed. Histological examination showed granulomatous lesions and bacteriological culture identified *Mycobacterium tuberculosis*.

Case report 2: A 35 year-old Somalian woman attended the ENT outpatient clinic with an ulcerative lesion of the left nasal vestibule. Granulomatous lesions were observed on histological examination and bacteriological culture revealed the presence of *Mycobacterium tuberculosis*.

Conclusion: In both cases, the histopathology of the resected nasal mucosa and lymph nodes demonstrated caseating granuloma. Tuberculosis is an increasing and major world wide problem, especially in developing countries where the spread has been facilitated by AIDS. However, it can occur in immunocompetent patient without history of contact with subjects known to be infectious. Therefore, tuberculosis should be considered in swollen lymph node or granulomatous lesions, although the incidence of primary head and neck tuberculosis is uncommon.