

Pregnancy with tubercular lymphadenitis - a case report

S. Pati, B. K. Saumandal, T. K. Lahiri

B. S. Medical College & Hospital, Bankura, W.B.

Smt. P. K. - 28 years, P₀+0 tribal female M/F 2 yrs. admitted to emergency ward on 26.12.97 with C/o Pain in lower abdomen for 2 days. She had amenorrhoea for 8½ months. Further history revealed she experienced low grade fever for last five months and developed multiple swellings over groin for 4 months.

O/E Her G.C. was below normal, moderately pale, temp - 99°F, Pulse - 100/min, BP - 130/80, no other lymphadenopathy. CVS & RS were within normal limit.

P/A Liver and spleen were not enlarged. Ut - 32 weeks, contractions - Occasional, nontender, Cephalic presentation, head floating, FHS - audible & regular. There were multiple swellings or Lymph nodes on both inguinal region, Skin over the nodes was indurated, some nodes were matted and having Sinus - Sero Purulent discharge + (Fig. 1), nodes were tender.

P/V Cx partly effaced but OS closed, presenting part high up, no abnormal discharge.

She was given antibiotics, tocolytics, haematinics and Calcium. Necessary investigations were performed.

Investigations : Hb - 7 gm%, TLC - 11,000/c.m.m. DC-N68 L30 E2 ESR - 15 mm.1st hr Mx test -ve, X-ray Chest NAD, Pus smear for AFB - ve, PUS Culture - sterile, Lymph node biopsy revealed tubercular lymphadenitis. After six days of admission she went into Preterm labour and a grossly asphyxi-



32 weeks pregnancy and multiple swelling or inguinal lymph nodes which are matted & infected.

ated premature baby weighing 1.4 kg was delivered which died after few hours. She was given Antitubercular drugs and discharged. Three months later she attended OPD with improvement of G.C. and the swellings reduced in size to a great extent.