

Clinical Images

Tuberculosis of Left Clavicle in a Young Boy

PULAK KUMAR JANA,¹ IRA DAS,² TAPAN DAS BAIRAGYA,³ SIBES KUMAR DAS⁴

A 13 years old boy admitted with low grade fever for 2 months, painless swelling over medial aspect of left clavicle for 1 month along with discharge from the swelling for one week. Patient has no past history of tuberculosis and contact history of tuberculosis. Systemic examination was normal except nontender swelling with discharging sinus over medial aspect of left clavicle. Blood parameters were normal except raised ESR (30 mm). Chest Xray showed osteolytic lesion in medial aspect of left clavicle. CT scan of thorax showed osteolytic lesion in medial end of left clavicle with sequestration formation and overlying soft tissue swelling, suggesting chronic osteomyelitis of left clavicle, fig. (1 & 2). FNAC of swelling showed caseous necrosis with epithelioid cell granuloma. Patient was treated with CAT I antitubercular drugs with prolongation of continuation phase for another 3 months. Patient is well at present and on regular follow up.



Fig.-1: CT scan of thorax showing osteolytic lesion with sequestration formation and overlying soft tissue swelling of left clavicle.

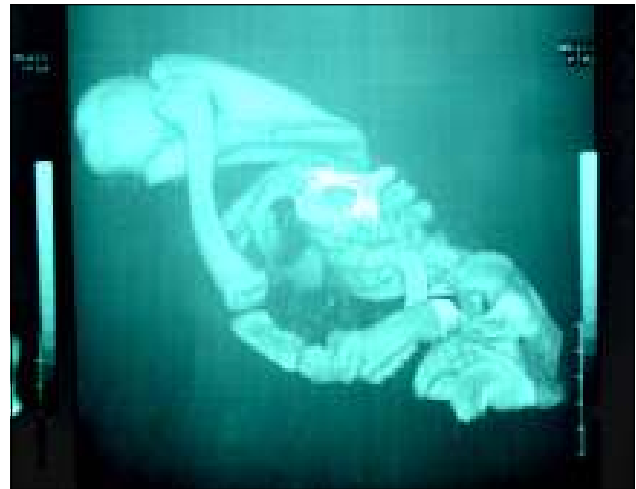


Fig.-2. CT scan of thorax (bone window) show destruction of medial end of left clavicle.

Tuberculosis of the clavicle without involvement of neighboring joints is very rare, <1% of all osteoarticular tuberculosis.¹ X ray may show diffuse thickening and honeycombing, or multiple cystic cavities and sequestration.²

Conflict of Interest: none

References:

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1. Associate Professor, Department of Chest Medicine, Institute of Post Graduate Medical Education & Research, Kolkata, Kolkata-700094, West Bengal, India, Email- doctorjana_23@yahoo.com
2. Medical Officer, Department of Paediatric Medicine, Medical College, Kolkata
3. R.M.O. Cum Clinical Tutor, Dept. of Chest Medicine, North Bengal Medical College. Darjeeling, West Bengal, Email-tdasbairagya@gmail.com
4. Associate Professor, Department of Chest Medicine, Medical College, Kolkata

Correspondence: Dr Pulak Kumar Jana, Deeshari Comfort, Flat -1/1A, 732 Sreenagar West, Kolkata-700094, Near Mangalik Bhavan, New Garia Housing Cooperative, West Bengal, India, Email- doctorjana_23@yahoo.com