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Concomitant Tuberculous and Bacterial arthritis in Chronic Tophaceous Gout

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A 59-year old male with chronic tophaceous gout and pulmonary tuberculosis who have concomitant tuberculous and bacterial arthritis, presented with a four-month history of bilateral knee swelling with the right knee being worse is described. Left knee improved while right knee increased in swelling and eventually started draining non-foul smelling yellowish fluid with chalky material. Blood cultures were negative. Synovial fluid grew methicillin-resistant *Staphylococcus aureus* and tested positive for acid fast bacilli. Endotracheal aspirates tested positive for acid fast bacilli and grew *Mycobacterium tuberculosis*. He was treated with clindamycin, anti-Koch's, colchicine, low-dose prednisone, febuxostat and tramadol but failed to undergo surgery. Patient demised from acute coronary syndrome. In a systematic review of literature, this is the first report on concomitant tuberculous and bacterial arthritis in gout. This case highlights the need to explore other causes of joint swelling in a diagnosed case of chronic tophaceous gout. Concomitant TB and/or bacterial arthritis can complicate these patients. Hence, the need for microbiologic and crystal analysis of synovial fluid cannot be overly emphasized to tailor the specific management for these patients.

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