An Extra Pulmonary Tuberculosis Patient, Abdominal Tuberculosis with Pseudo-Meigs Syndrome Mimicking an Advanced Ovarian Cancer

Case report: Rare Case

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ABSTRACT
Background : Tuberculosis (TB) is still major worldwide concern especially at tropical country. Tuberculosis also can infect any place in the body. It is estimated that between 10-25% of TB infections occur extra pulmonary. Abdominal Tuberculosis occurs about 10 % of extra pulmonary tuberculosis. Abdominal Tuberculosis can be easily confused with malignancy. Pseudo Meigs syndrome is co existence of pelvic tumour, hydrothorax, and ascites. It is resembles with metastatic ovarian cancer. Abdominal tuberculosis may resemble with advanced ovarian cancer. The patient presented ascites, pleural effusion, cystic ovarian suggestive of Pseudo-Meigs syndrome. Pseudo Meigs Syndrome is clinically important because resembling of metastatic pelvic cancer. CA-125 is elevated 80% of post menopausal ovarian cancer but not specific and non diagnostic in premenopausal women. SAAG < 1.1 mg / dl indicates non Portal hypertension, caused by infection, malignancy, nephrotic syndrome, or pancreatitis. Finding Datia Langhans at histopathology could be considered as tuberculosis but it can be revealed from another disease. Acid fast stain positive increase the probability of tuberculosis infection. Family history of tuberculosis infection could increase diagnostics value of tuberculosis. Antituberculosis according to the latest protocol led to clinical improvement.

Biography
Mike Christanti has graduated from medical student at the age 25 years old from Airlangga University and unttil now as a resident of internal medicine Soetomo General Hospital Surabaya since 27 years old.
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