Bladder Tuberculosis: How to Prevent Complications

Introduction and Objective: Bladder TB (BTB) is one of the most serious complications of renal TB, and it is diagnosed in 45.6% among urogenital tuberculosis (UGTB). Inadequate treatment of BTB resulted in severe complications (shrinkage of the bladder).
Materials and Methods: There were 149 patients with BTB enrolled in the study. Seventy-six patients (1st group) were treated with standard TB therapy, and 73 patients (2nd group) received modified therapy, included trospium chloride.
Results: Standard therapy was insufficient in more than half of the cases: 42.1% were cured, 57.9% developed complications: posttuberculous cystalgia (36.8%) and microcystis (21.1%). There were 16 patients with microcystis underwent enterocystoplasty. Incontinence developed in 8 patients (19.1%): three women (average age 60.3 years) and five men (average age 66.4 years); this symptom did not improve after chemotherapy. The 2nd group of patients responded in a favourable manner to the combined treatment: urinary frequency reduced about 75%, bladder capacity increased an average of 4.7 fold. Recovery was reached in 84.3%. Posttuberculous cystalgia developed in 15.7% only. None of the patients developed microcystis after the combined treatment. In the 2nd group also 8 patients had incontinence; among them five reported no urgency urinary incontinence episodes after 3 months therapy with trospium chloride. Tolerance to the treatment was good: only one patient had light side effect (mouth dryness).
Conclusion: Bladder tuberculosis is always secondary to renal TB, however quite often renal TB may start with voiding symptoms such as dysuria, frequent and painful urination and incontinence. Urinalysis reveals – pyuria, erythrocyturia and growth of unspecific bacteria is possible. In regions with endemic tuberculosis all patients with acute cystitis should be evaluated as suspicious to TB. Antituberculous therapy in combination with trospium chloride is high effective for bladder TB patients.