

Dynamics in Clinical Features of Kidney Tuberculosis

Introduction and Objective: Kidney tuberculosis (KTB) has non-specific clinical features and mimics other different urological diseases: urolithiasis, cancer, pyelonephritis, cystitis etc. Moreover clinical features are not stable for ages; they change rather quickly.

Material and Methods: The aim was to compare clinical features of KTB in 1980-1990 (1st group, 268 patients) and in 2000-2005 (2nd group, 227 patients); both groups were in-patients of Urogenital Department of Novosibirsk Research TB Institute.

Results: The frequency of dysuria was the same (57.1% and 54.3%), but a flank pain in 2nd group was diagnosed more often (58.9% and 72.8% accordingly). Frequency of renal colic decreased from 16.1% up to 12.3%; haematuria increased from 30.4% up to 48.1%. Pyuria left the most common laboratory sign – 91.7 – 91.4% in both groups. Significantly reduced frequency of positive cultures – mycobacteriuria was revealed in 84.5% in first group and in 44.0% only in novo days. Asymptomatic course was about equal: 8.9% in 1st group and 6.2% in 2nd group, but frequency of acute debut changed significantly. In 1st group 34.5% patients got sick acutely, with manifesting clinical features, fever, pain etc. In second group the same patients there were 4.9% only. On contrary, obscure, vague symptoms were in 56.6% in 1st group and in 88.9% in the 2nd group. Mean age was stable: 40.5 in 1st group and 43.8 in 2nd group. Male:female ratio was about 2:3 in both groups.

Conclusion. We can speak about clinical pathomorphosis of KTB. Clinical features of KTB have changed in last years. Acute onset of KTB became 7 times rarer, significantly more often patients have flank pain and haematuria now. Asymptomatic course of KTB is possible too. All this may be a reason for late diagnosis.