

Primary Tuberculosis of the Thyroid Gland: A Case Report

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Tuberculosis of the thyroid gland affects about 0.1% of the population with TB and is rare even in regions where tuberculosis is endemic. (Hernández M. et al., Thyroid tuberculosis: A Rare Cause of Compressive Goiter. Endocrinol Nutr. 2013).

Objective: To discuss the signs and symptoms of thyroid tuberculosis as well as its diagnosis, treatment and disease course.

Method: We report a case of a 60 year old male presenting with history of painful, progressively enlarging marble-sized thyroid nodules for 1 month accompanied by occasional low grade fever, weakness and weight loss. He has no history of, or evidence of pulmonary tuberculosis.

Results: An aspiration biopsy of the nodules was performed revealing polymorphic lymphoid cells with occasional giant cells consistent with granulomatous thyroiditis. There was a substantial decrease in the severity of the pain within two to three weeks of starting anti-Koch's therapy. After completion of 6 months of treatment, there was decrease in the size and number of the nodules on repeat ultrasound.

Conclusion: Though rare, tuberculosis should be one of the differential diagnosis of patients presenting with painful thyroid nodule/s even in patients with no history of tuberculosis especially where the prevalence of tuberculosis is high. This case like other similar cases reported was very responsive to short course of anti-Koch's regimen.