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BCGitis in an elderly patient: case report

A 71-year-old man developed BCGitis following BCG instillations.

The man presented with a fever and poor general condition. Since a BCG instillation [*details of administration not stated*] a week earlier, he had a fever, voiding problems and increasing fatigue. The BCG instillation had been conducted following a cystoscopy and gross haematuria. He had acute cystitis with coagulase-negative *Staphylococcus* spp. Previously, he had recurrent urothelial carcinoma of the bladder and had been treated with 6-fold BCG instillation therapy [*details of administration not stated*].

The man was treated with piperacillin/tazobactam. His pulmonary situation deteriorated and a thoracic CT scan showed generalised pneumonitis with incipient pulmonary fibrosis. Due to a clinical picture of BCGitis, he was initiated on tuberculostatic therapy which included ethambutol, rifampicin, and isoniazid. He developed ARDS which required a tracheostomy and intensive care therapy with medical monitoring. His general condition and pulmonary situation improved. His anti-mycobacterial therapy was administered for 6 months.

Author comment: "*BCGitis is caused by *Mycobacterium bovis* BCG entering the blood stream. Clinically it presents as miliary tuberculosis. BCGitis is a serious complication after instillation therapy.*"

Atanassov G, et al. Bcgitis: A purely clinical picture? Urology 82 (Suppl. 1): S228-S229 abstr. UP.104, No. 3, Sep 2013 [abstract] - Germany 803100743