

14. SARCOIDOSIS AND TUBERCULOSIS- A DIAGNOSTIC AND MANAGEMENT CHALLENGE



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Introduction. The intricate relationship between sarcoidosis and tuberculosis has been a subject of considerable debate among clinicians and researchers as both diseases exhibit clear clinical parallels that make differential diagnosis extremely difficult especially in nations where tuberculosis is highly prevalent. Given that immunosuppression, a treatment of sarcoidosis, is not desired in tuberculosis patients, this has significant consequences for treatment choices.

Case statement. This case report presents a complex medical history of a 71 year old female patient, previously diagnosed with pulmonary tuberculosis (TB) in 2012 and treated with specific DOTS therapy, experienced a relapse in 2013, leading to disseminated pulmonary TB. Despite initial improvement, subsequent exacerbations occurred, with symptoms including dry cough, dyspnea, chest discomfort, vertigo, periodic headache, general weakness, and weight loss.

Discussions. Detailed medical history reveals a progression of symptoms since 2017, prompting further investigation. Chest CT scans demonstrated negative dynamics compared to previous years, suggesting a potential recurrence of infiltrative pulmonary TB or progression of pulmonary sarcoidosis with advanced fibrosis.

Conclusion. This case underscores the challenges in managing recurrent pulmonary conditions and highlights the need for a multidisciplinary approach in the diagnosis and treatment of complex cases.