Prostate biopsy for diagnostic of prostate tuberculosis

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Material and Methods. 93 patients suspicious on prostate TB were enrolled in study. All underwent ultrasound guided core prostate biopsy with local anaesthesia. Straws were investigated by PCR, pathomorphology and culture.

Results: Common complaints were pain (96.8%), dysuria (79.6%); laboratory findings –leucospermia (73.1%), haemospermia (51.6%). 37.6% had TB history, 34.4% had active TB of another localization, mostly – pulmonary. Results of PCR: HPV – 10.7%, Ureaplasma – 2.2%. Mycobacteria culture was positive in 6.9%. Pathomorphologically in 94.6% inflammation was found, in 65.6% – fibrosis, in 9.7% - intraprostatic neoplasia, in 5.4% - cancer, in 24.7% - TB.

Conclusion: The diagnosis of prostate TB is a very difficult task, because clinical features and laboratory signs are non-specific, alike chronic prostatitis. Absolutely pathognomonic symptom is a cavern on urethrogram, but caverns mean late-diagnosed complicated form, cavernous prostate TB can’t be cured neither chemotherapy nor by surgery. Prostate TB in early infiltrative non-cavernous stage may be diagnosed by PCR, culture or pathomorphology. Possibility of these methods alone is poor, it is necessary to use its in combination.