

☆ **Complex Clinical Cases**

TUBERCULOUS AORTITIS - A CATASTROPHIC PRESENTATION OF AN ANCIENT DISEASE IN A YOUNG PATIENT

Moderated Poster Contributions
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Background: Tuberculous aortitis is a rare type of extrapulmonary tuberculosis, which can be due to bloodstream dissemination or transmural perforation. Diagnosis is confirmed by isolating *Mycobacterium tuberculosis*, and treatment involves drugs and surgery.

Case: 19 year-old female with no comorbidities presented with a complaint of chronic dry cough, evening fever, chest pain, night sweats, and weight loss. A thoracoabdominal aortic aneurysm with multiple saccular dilations (largest diameter 78 mm) associated with periaortic lymphadenopathy was identified. Biopsy of a perisplenic lymph node revealed granuloma with caseous necrosis. Presumptive diagnosis of tuberculous aortitis was made, antituberculostatics were initiated with clinical improvement.

Decision-making: While awaiting surgery, she presented with massive hemoptysis due to aneurysmal rupture. She underwent surgery with replacement of the descending and abdominal aorta with reimplantation of the intercostal arteries and visceral branches. One month after, she developed a large hematoma extending from the aortic arch to the thoracoabdominal transition. Anastomotic leakage from the intercostal arteries was suspected and percutaneous treatment was performed with success.

Conclusion: Tuberculous aortitis is a rare complication of an old disease with poor prognosis. Our patient had catastrophic presentation, with many complications, but was discharged after two months, asymptomatic and without neurological sequelae.

