

MEETING ABSTRACT

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Surgical Management of Tuberculous Constrictive Pericarditis in a Developing Country: Case Report

Sotheenathan Krishinan^{1*}, Basheer Ahamed Abdul Kareem¹, Abu Yamin Khamis¹, Ahmadi Salleh¹, Sivasangari Subramaniam², Mohd Hamzah Kamrulzaman¹

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Background/Introduction

Tuberculosis has been increasing in incidence in recent years especially in developing countries. Tuberculous pericarditis is a form of extra pulmonary tuberculosis that is considered unusual.

Aims/Objectives

We report a case of tuberculosis of pericardium complicated with constrictive pericarditis and the surgical challenges encountered.

Method

Diagnosis is often challenging. High indexes of suspicion combined with the use of all available diagnostic techniques are important to increase diagnostic yield. A definite or proven diagnosis is based on demonstration of tubercle bacilli in pericardial fluid or on histologic section of the pericardium. Constrictive pericarditis is a complication of tuberculous pericarditis that necessitates surgical intervention.

Results

The timing of surgical intervention is controversial, but many experts recommend a trial of medical therapy for non-calcific pericardial constriction, and pericardiectomy in non-responders after 4 to 8 weeks of anti-tuberculosis chemotherapy.

Discussion/Conclusion

Pericardiectomy is a surgical option which carries high mortality and morbidity. We report a case of tuberculosis of pericardium complicated with constrictive pericarditis

and the surgical challenges both intraoperative and post operatively.

Authors' details

¹Department of Cardiothoracic, Penang General Hospital, Georgetown, Penang, 10990, Malaysia. ²Clinical Research Center, Penang General Hospital, Georgetown, Penang, 10990, Malaysia.

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¹Department of Cardiothoracic, Penang General Hospital, Georgetown, Penang, 10990, Malaysia
Full list of author information is available at the end of the article