

# Pott's disease

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- Caseating granulomas
- Langhans cells
- Hunchback deformity

Twenty-three year old man was admitted for assessment of lightheadedness, increased heart rate and recurrent back pain of four months duration associated with progressive numbness and stiffness of both legs and feet, causing trouble in rising and in climbing stairs. During this period, because of loss of appetite, he lost 20 kilograms, and 2 weeks prior to admission he experienced difficulty in urination and erection. Physical examination revealed kyphosis, a "hunchback" deformity, muscle atrophy, decreased tonicity and weakness of the lower extremities followed by decreased vibratory and position sense, decreased rectal tone and saddle anesthesia. Tuberculin skin test was positive. Normal chest radiography. The cerebrospinal fluid showed a high protein of 1121 mg/dl. The patient underwent immediate surgery. Histopathology revealed areas of consolidation with central caseating necrosis (caseating granulomas) and Langhans giant cells. Cultures taken at the time of surgery were positive for *Mycobacterium tuberculosis*. Negative for infection with human immunodeficiency virus. Postoperatively, the patient regained normal neurologic function and started prompt antituberculous therapy<sup>1</sup>.



**FIGURE 1.** Magnetic Resonance Image showing destruction of vertebral bodies (L2, L3) with intraosseous and epidural abscess resulting in spinal canal stenosis.

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