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# Role of surgery in tuberculosis

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Tuberculosis is a very old disease caused by mycobacterium tuberculosis and has caused more sufferings and deaths than any other bacterial infection. The causative organism is an obligate pathogen rod in shape, stains with difficulty and resists decolourization and so called acid-alcohol fast bacilli. It is present in different types including human type, bovine types and other less common types. It can be definitely diagnosed by demonstration of the causative organism in pure cultures, however clinical and radiological investigations supplemented by direct microscopy and skin testing are usually enough. The treatment of tuberculosis includes rest, diet, antituberculous chemotherapy and sometimes surgery. Antituberculous chemotherapy is the most important in treatment of all forms of tuberculosis, and constitutes an integral part both as a sole measure or as a complementary to surgical measures. The medical treatment traditionally comprises a group of the so called first line drugs including rifampin, streptomycin, isoniazide and ethambutol, and other less commonly used drugs, which are reserved for therapeutic failures of first row drugs. Two or more drugs are usually used in starting the treatment. Surgery is indicated in certain situations in most types of tuberculosis when there are complications or failure of medical treatment in one hand, however it is also indicated for diagnostic procedures when other less invasive measures do not supply sure diagnostic criteria. So a definite role has been described in gastrointestinal, skeletal, pulmonary, lymph node, breast and genitourinary tuberculosis.