

## **SPONDYLODISCITIS SPECIFICA SEGM. L4L5 – REPORT OF CASE**

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**PURPOSE:** To present a case of Tuberculous spondylodiscitis segm. L4L5 , with clinical symptoms after Interlaminectomiam L4L5 lat. sin. cum extirpatio i. v. disci et foraminotomiam L5.

**METHOD:** Based on clinical symptoms and results of roentgenograms, CT scan and MRI, indication for a surgery has been set, due to Disc hernia L4L5, osteolytic processes in the area of body's vertebra L4L5 and particular spondylodiscitis. Acidoresistant germs were found with direct microscopic examination of the sample through fluorescent method, but through standard method of cultivation on rigid and fluid base, Mycobacterium did not grow. In the sample of the bone tissue submit with the Nested PCR method, DNA Mycobacterium tuberculosis was found.

**RESULTS:** At 38-year old man roentgenograms and CT scan results showed Disc hernia L4L5 and surgery was performed. Several months later MRI showed development of osteolytic process on body's vertebra L4L5, the patient undergoes surgery again and manure abscessus was found. Further aggravation caused the destruction of the bone structure L4L5, acidoresistant germs were found through microscopic examination of aspirat from the wound and through Nested PCR method, DNA Mycobacterium tuberculosis was proven. The patient had an ATB therapy for one year, whereby periodical caseous secretion from the wound, MRI shows partial regression of the specific process. The patient is currently without therapy, but has occasional pain and walking difficulties.

**CONCLUSIONS:** By patients with long term backache and signs of bone structure destruction in the vertebra, extrapulmonary tuberculosis should be considered. In this case, it is left to consider whether it is primary or secondary tuberculosis – possible hematogenous spreading of causes from lungs, even though PPD, sputum and material taken during bronchoscopy were negative. It is also questionable, whether granulomatous tissue simulated a herniated lumbar disc during the first diagnosis of disc hernia.