ABSTRACT

Objective: To describe a case of nasopharyngeal carcinoma coexistent with primary nasopharyngeal tuberculosis and review the literature.

Methods:

Design: Case Report
Setting: Tertiary Public University Hospital
Patient: One

Results: A 28-year-old man presented with recurrent sore throat and neck pain with clinically enlarged tonsils. He underwent a routine adenotonsillectomy. Histopathologic examination revealed non-keratinizing squamous cell carcinoma with caseating granulomatous inflammation typical for tuberculosis in the same adenoid specimen. Nasopharyngeal carcinoma was staged T2bN2M0. He was treated with concurrent chemoradiotherapy and a 9-month course of anti-tuberculosis treatment. He recovered and remained symptom free one year after treatment.

Conclusion: Nasopharyngeal carcinoma (NPC) and tuberculosis (TB) are both very common diseases in Sabah, East Malaysia. However, it is very rare that both diseases present at the same time and same anatomical area in a patient. Diagnosis can be very challenging and confusing. Multidisciplinary consultations are warranted for appropriate treatment. Combined anti-tuberculosis treatment and concurrent chemoradiotherapy may be appropriate and effective.

Keywords: nasopharyngeal carcinoma, primary nasopharyngeal tuberculosis, adenotonsillectomy

CASE REPORT

A 28-year-old Malay man presented with the complaint of recurrent sore throat and fever over the past few years. He denied epistaxis, rhinorrhea, tinnitus, cough, loss of appetite or weight. Clinical examination showed enlarged tonsils. He underwent a routine adenotonsillectomy. Histopathologic examination of the same slide of the adenoid specimen showed fragments of lymphoid tissue covered by respiratory epithelium. The underlying stroma showed infiltrations by clusters and sheets of malignant squamoid cells. There was also presence of caseating necrosis surrounded by epithelioid granulomas with occasional Langhan's giant cells seen. No acid-fast