

SCENARIO

A 32 –year-old shopkeeper is brought to the emergency room with a cough productive of sputum mixed with blood. He first noticed a cough about 2 months ago, but it was nonproductive. In the past several days his sputum production has increased and become mixed with blood. He also notices weight loss during this period of 2 months. He also has fever up to 100.8°F with sweating especially at night for the last one month.

On clinical examination, he is lean thin male. His vital signs are normal. His head and neck examination is normal. He has no palpable lymph node in his neck or axilla. His chest examination reveals bronchial breath sounds with increase vocal resonance over the left upper chest. A chest x-ray shows a cavity along with infiltrate of the left upper lobe.

QUESTIONS:

- Q1. What are the problems encountered in this patient?
- Q2. What is the most likely cause of this patient's symptoms?
- Q3. What technique of staining is most commonly used to identify this organism?
- Q4. What is the normal histology of alveoli?
- Q5. What are the pathological changes in lung in this disease?
- Q6. What is Primary Tuberculosis?
- Q7. What is post primary tuberculosis?
- Q8. Name the viscera involved in post primary tuberculosis?
- Q9. Discuss the immunological basis of tuberculin test?
- Q10. Name the medicines used in the treatment of this disease?
- Q11. What are routes of transmission /spread of the organism responsible for this disease?