

Cutaneous Tuberculosis



Incidence of Tuberculosis

Pulmonary - 90%

Extrapulmonary - 10%

Cutaneous - 1-1.5%

Immunology

PRIMARY COMPLEX

-Ghon focus, Lymphangitis, Lymphadenitis

Tuberculin : PPD

Montoux Test: 5 T.U.

BCG vaccination

CLASSIFICATION (BEYT)

- **Inoculation tuberculosis (Exogenous)**

Tuberculous chancre

Warty TB

Lupus vulgaris

- **Secondary tuberculosis**
(Endogenous)

Scrofuloderma

Orificial TB

- **Hematogenous (Endogenous)**

Lupus vulgaris

Tuberculous gumma

Tuberculous chancre

Primary complex –Skin

First episode – Non sensitized

Inoculation of mycobacteria onto skin



Tuberculous chancre

Tuberculous chancre +
affected regional lymph nodes

- **Tuberculous primary complex**



Warty tuberculosis

(Tuberculous verrucosa cutis)

Sensitized patient

Exogenous infection

Auto- inoculation

Accidental inoculation



Warty tuberculosis

(Tuberculous verrucosa cutis)

Sites

- Exposed to trauma
- Infected sputum

Clinically

Single warty
papule/plaque



Tuberculosis verrucosa cutis



Lupus vulgaris

Chronic progressive form

Commonest - India

Females > Males

Sensitized patient

Entry- Exogenous
- Endogenous



Lupus vulgaris

Sites –

Head and neck

Limbs, buttock,

Mucosae



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Lupus vulgaris

Clinically

Solitary papule,

Plaque, ulcer

Vegetating,

Tumorous



Lupus vulgaris



Lupus vulgaris



Lupus vulgaris

Complications

- Scarring
- Contractures
- SCC
- Active internal foci



Scrofuloderma

Contiguous involvement
of skin overlying
tuberculous process

-Lymphnodes



Scrofuloderma

-Joint



Scrofuloderma

-Bone



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Complications

- Subcutaneous nodule
- Ulcers /sinuses
- Undermined bluish margin
- Cheesy discharge
- Heals with scarring



Orificial tuberculosis

Active internal TB focus

Pulmonary-

mouth, tongue

Intestinal-

genitalia

Anogenital-

perianal



Tuberculous Gumma

(Metastatic tuberculous abscess)

Hematogenous dissemination

Firm subcutaneous nodule

Fluctuant swelling

Undermined ulcer with sinuses

Miliary Tuberculosis

Hematogenous

Infant / Children

Immunosuppressed host

Bluish crop of papules,

Vesicles, pustules



Tuberculides

Hypersensitivity phenomenon to organisms

Positive reaction to tuberculin

Presence of active proven TB elsewhere in
body

Favorable response to ATT

- **Tuberculids (Eruptive)**

- Lichen scrofulosorum

- Papulonecrotic tuberculid



Lichenoid papular eruption

Lichen scrofulosorum



Papulonecrotic tuberculid

Symmetrical crop of necrotizing papules

Healing with scarring





DOIA

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Erythema Induratum

Nodules

Painful shallow ulcers



•Diagnosis of cutaneous tuberculosis

- Clinical history

Physical examination

- Investigations

Diagnosis : - Direct microscopy -ZN
staining

Culture - LJ medium
- Guinea Pig

Histopathology - tuberculoid granuloma

PCR

Treatment

9 months

Initial Phase (2 months)-

-INH,RIF,PZA,E

Continuation phase(7 months)-

-INH, RIF

6 months

Initial Phase (2 months)

:INH,RIF,PZA,E

Continuation phase(4 months)-

-INH, RIF

DOTS

Regimen : extrapulmonary T.B.

