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**Male genital tuberculosis.**

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A 51-year-old man presented with painless left testicular swelling for 1 month, with fevers, chills, night sweats, weight loss, and increased difficulty voiding over 6 months. He underwent radical orchiectomy; surgical pathology revealed granulomas containing acid-fast bacilli in the testis and epididymis. Male genital tuberculosis was diagnosed using nucleic acid amplification on urine and confirmed by positive urine and sputum cultures for *Mycobacterium tuberculosis*. Genital disease is an unusual extrapulmonary manifestation of tuberculosis, often seen in middle-aged men with renal or pulmonary tuberculosis. Clinical findings are variable, but commonly include dysuria with sterile pyuria or a painless testicular mass. Initial diagnosis is often incidentally made on pathological specimens and confirmed with nucleic acid amplification and cultures. Treatment using a standard four-drug regimen is usually sufficient; surgery is rarely required. This case is used to raise awareness of, and formulate a minimally invasive diagnostic approach to, this unusual but important entity.

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