



Should a chest x-ray be performed and efforts for ruling out other focus primary tuberculosis done in all patients diagnosed with spinal tuberculosis?



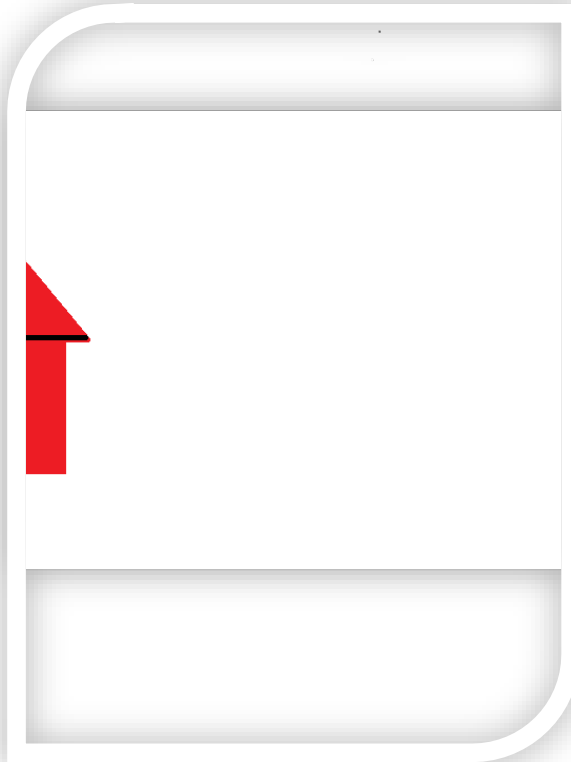
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# 3rd Meeting of the International Consensus Meeting 8-10 of May, 2025 Istanbul



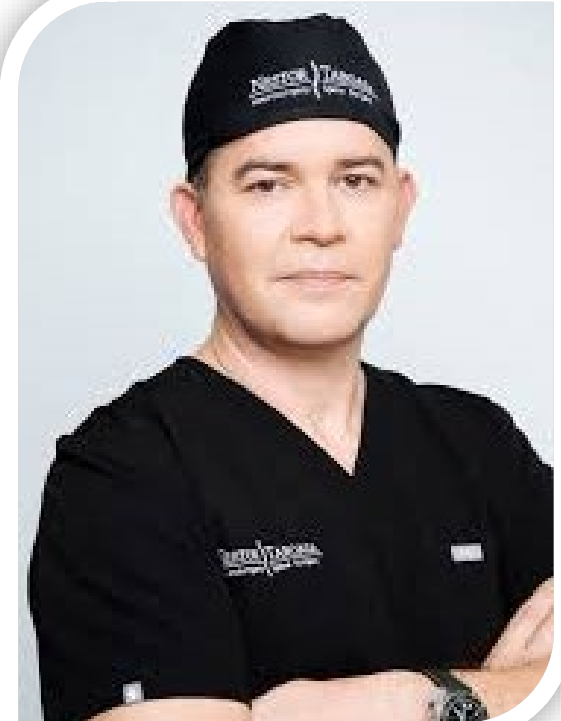
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Nishank Mehta



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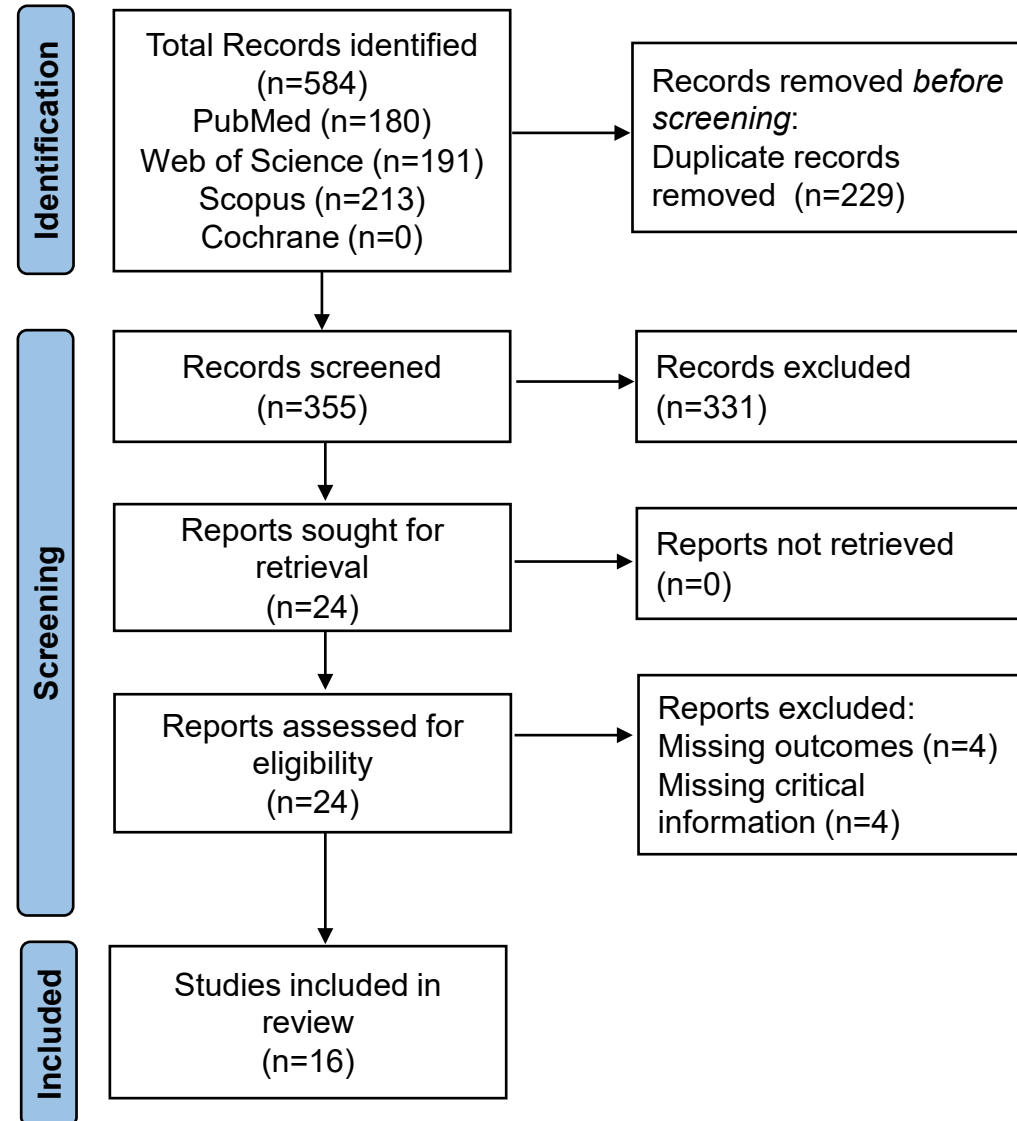


## Why is this topic Important

- Lack of standardized guidelines for diagnostic work-up for suspected or confirmed spinal tuberculosis
- Whether to perform chest radiograph in patients diagnosed with spinal TB has two important implications:
  - (i) While extra-pulmonary tuberculosis (EPTB) is generally considered to be non-infectious, **the presence of concomitant pulmonary disease can still render these patients infectious** – possibly requiring isolation to prevent nosocomial transmission
  - (ii) Concomitant involvement of other systems or organs **may portend increased morbidity** when compared to patients with only STB –requiring involvement of multidisciplinary teams to improve outcomes



# Literature Review/ Process







## Findings from Literature

- ❖ Lack of studies that have directly addressed this question – chest radiographs included as a part of diagnostic work-up in several epidemiological studies.
- ❖ Rates of concomitant pulmonary involvement vary from 4%-66%
- ❖ Presence of a concomitant active tubercular chest lesion correlated positively with the location of the spinal lesion in the cervical or thoracic spine (*Shim et al. 2020*)
- ❖ Most studies **do not** mention nature of radiographic findings, whether disease was active or not (healed) and whether additional microbiological tests were done (sputum culture/smear positivity) to confirm infectivity



## Findings from Literature

- ❖ As per one study, there was no significant difference in the occurrence of positive sputum-culture results in patients with or without abnormal chest radiograph findings (*Parimon et al. 2008*)
- ❖ CT scans more sensitive and specific for detecting concomitant pulmonary TB – including pleural TB (not detected with CXR), but affordability and accessibility is an issue
- ❖ No particular recommendation for specific tests to rule out foci other than lungs (lymph nodes, gastrointestinal tract, ribs, etc)



## **Question:**

❖ Should a chest x-ray be performed and efforts for ruling out other focus primary tuberculosis done in all patients diagnosed with spinal tuberculosis?



## ❖ **Response:**

Yes, Based on available data, it appears that there is a substantial percentage of patients with spinal tuberculosis who have concomitant pulmonary involvement and hence, chest radiography should be performed in all patients diagnosed with spinal tuberculosis.





## ❖ **Vote:**

**Agree – 100%, Disagree – 0%, Abstain – 0%**  
**(Unanimous Consensus)**