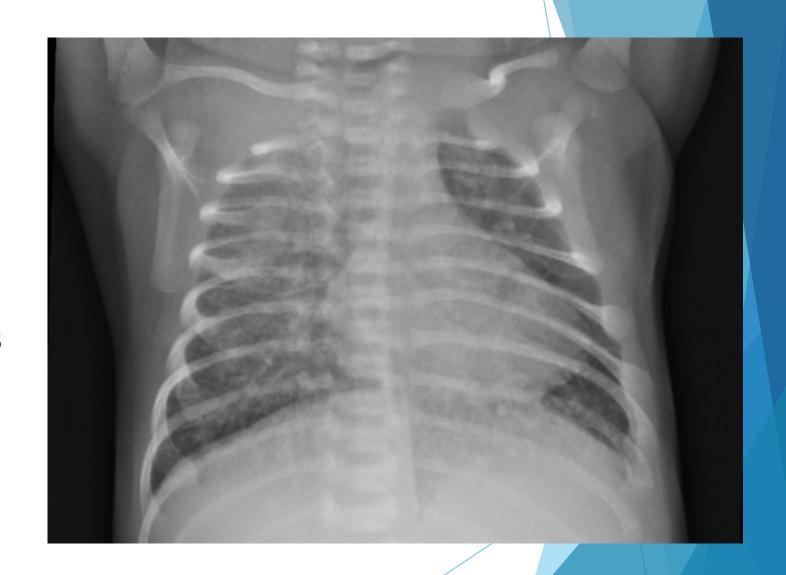
# TB and Pregnancy Session: Case Presentation

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- ▶ ID: Two-week-old, term infant
- Chief Complaint: Respiratory distress and fever
- History of Presenting Illness:
  - Presented to general pediatrician for two-week well infant checkup
  - ▶ Noted tachypnea, and respiratory distress
  - Sent immediately to a children's emergency department (tertiary referral centre)
  - ▶ In the ER was noted to be febrile (38.4 C), tachypneic (80 breaths/min), normal heart rate, normal oxygen saturation

- Full septic work-up (CSF, blood culture, urine culture) completed and empiric broad spectrum antibiotics started
- Continued to have fever, tachypnea, and tachycardia during admission
  - Responsive to acetaminophen
- Nasopharyngeal aspirate: negative for COVID, influenza, RSV
- Septic work-up: cultures negative

- CXR interpretation:
   "Moderate bilateral
   pulmonary
   opacifications."
- Discharged with diagnosis of viral lower respiratory tract infection



- Returns to general pediatrician 48 hours post-discharge
- Nurse in office notes baby is:
  - Lethargic
  - ► Hot to touch (temp 38.1 Celsius),
  - ► Tachypneic (> 70 breaths/min)
- Sent back to the emergency department
- CXR is repeated

- Interpretation: "Diffuse bilateral nodular opacities throughout, an atypical infection should be considered."
- Requires intubation and is sent to the pediatric intensive care unit



- ► The ICU team sends nasogastric aspirates for fungal microscopy and culture and acid-fast bacilli microscopy and culture
  - ► Smear positive, M. tuberculosis PCR positive
- ▶ QUESTION: How does a two-week-old contract tuberculosis?

### Source Case Investigation

- Local public health unit is immediately involved
- Only three adult contacts identified: mother, father, grandparent
  - ▶ From community with ongoing TB transmission
- Both the mother and father well, normal chest x-rays
  - Sputum collected
- ? Are we missing something?

### Maternal History

- ▶ 31 yo G9P7 female, from remote indigenous community
  - ► New diagnosis of diabetes in pregnancy
  - Buprenorphine
- Pregnancy uncomplicated
- Labor uncomplicated
- Gestational age= 37+6 weeks
- APGARS= 9, 9; Birthweight= 3.5 kg (well baby)

### **Good Advice**

- ► A trusted colleague recalls a similar case experience...
- Mother agrees to go for endometrial biopsy
  - ▶ M. tuberculosis PCR positive, smear negative, culture positive