

EDITORIAL COMMENT



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Tuberculosis: the forgotten plague!

Two years after covid 19 was declared a pandemic, mortality was significantly reduced by vaccination, but complete immunity is not enough as is demonstrated by recurrent infection, after new exposures. Daily medical practice is hindered by the protective measures to ensure security, and the access to health services is still very much conditioned by this disease!

The impressive images of endobronchial Tuberculosis (TB), being published in this issue of PJCVS, reminds us of its existence.

TB as any respiratory disease should have been reduced by social distancing and the use of face masks. But the decreased access to medical services and delays in diagnosis of this indolent condition, continued transmission in households and vulnerable individuals.

“The COVID-19 pandemic has reversed years of progress in providing essential TB services and reducing TB disease burden.”¹ the World Health Organization states in its 2021 Global Tuberculosis Report. The document reports the numbers of 2020, where a significant drop in the number of new cases being diagnosed, was accompanied by a paradoxical increase in the rate of TB related deaths both in HIV positive but also in immunocompetent hosts.

The different clinical presentations and associations with other diseases, like lung cancer, raises not only

diagnostic questions but staging issues, that might lead to upstaging of oncological patients.

In the back of our minds, whenever TB might be a remote chance, specimens should always be sent for mycobacteria diagnosis.

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REFERENCES

1. WHO. Global Tuberculosis report 2021.