

Abstract

Sacroiliitis is one of the modes of presentation of musculoskeletal tuberculosis. Among the drugs used to treat this condition, pyrazinamide plays a major role as a first line antituberculous medication. Among the adverse effects of the drug, elevated levels of uric acid had been reported in many occasions. Pathophysiology behind this effect is that pyrazinamide as a drug increases the uric acid reabsorption as well as it lowers the excretion of uric acid. By both these mechanisms it increases the uric acid levels in the serum and as a consequence it leads to crystal deposition in major joints causing gout.

Herein we report a case of a 43-year-old male patient presenting for the first time for the medical facility, with a history of gradual onset, progressive inflammatory type back pain for one and half years duration with no other systemic manifestations. His clinical examination was unremarkable. Investigations revealed a positive Mantoux finding along with infectious sacroiliitis evident by the imaging studies. He was initiated on antituberculous drug regime after which he developed gouty arthritis. His drug regime was changed and he was treated with supportive treatment after which he made a successful recovery.
