Abstract

Genitourinary Tuberculosis (GUTB) is an infection caused by Mycobacterium Tuberculosis to the urinary tract or genital organs. Urinary tuberculosis (TB) is more common than genital TB. It can affect bilateral kidneys as it spreads hematogenously. There are no gender differences, as males and females are equally affected. It is a common form of extra pulmonary TB, but the diagnosis is often delayed due to non-specific signs and symptoms as it is often treated as Urinary Tract Infections (UTIs). Recurrent and resistant UTI must be investigated for GUTB without delay as it can lead to chronic kidney damage. Imaging and tissue samples with cultures will help to arrive at a specific diagnosis. There are features of distorted pyelocaliceal system, hydronephrosis, hydroureter and stricture formations in ultrasound scan of Kidney, Ureter and Bladder (USS KUB) to suggest GUTB. We report a case of a 49 years old perimenopausal woman who presented with recurrent culture negative UTIs and was found to have GUTB. This case outlines how GUTB was successfully diagnosed using GeneXpert (Xpert MTB/RIF assay) and managed by a multidisciplinary team.