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Introduction: Di erentiating intestinal tuberculosis from Crohn's disease (CD) is a clinical challenge of therapeutic signi cance, because tuberculosis is mimicker to CD as regard symptomatology, clinical and radiological examination.

Case Description: Here, we report a case of chronic progressive constipation and abdominal distention due to intestinal tuberculosis that was previously mistreated as Crohn's disease. Surgery with resection anastomosis of the small bowel strictulosis was performed, followed by 6-month standard treatment for miliary tuberculosis, which was diagnosed on the basis of the presence of acid-fast bacilli in the diseased bowel and positive culture of M. tuberculosis from ascites, and stool samples. e patient was examined for 6 months a er and (s)8 (i)-13 si (r)13 (e (s)-P s)8 (i)-13 (s)]TJ /5 (linic)-2.96(o)12 (.9 (l)12 (t)10 (ur

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