

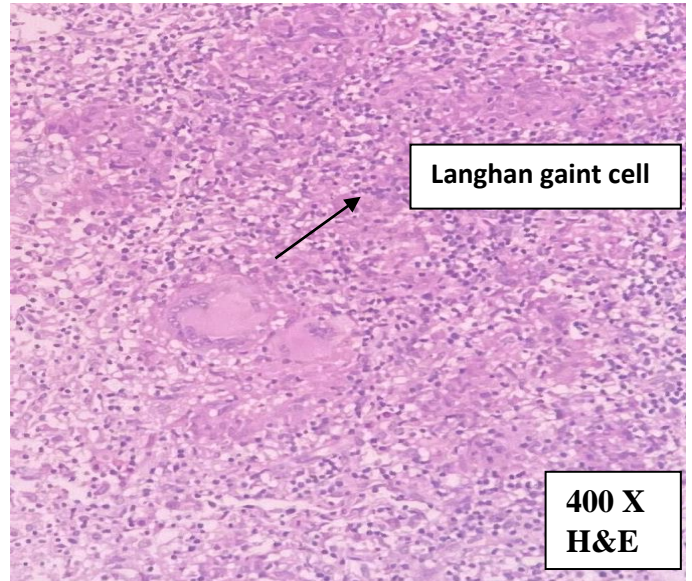
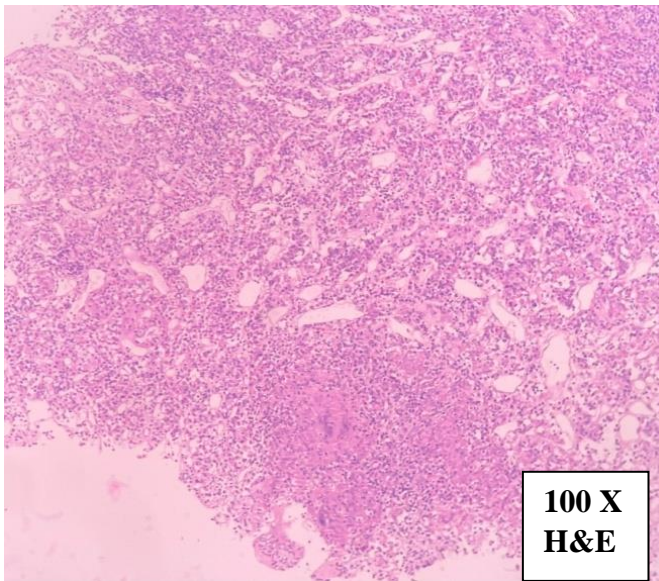
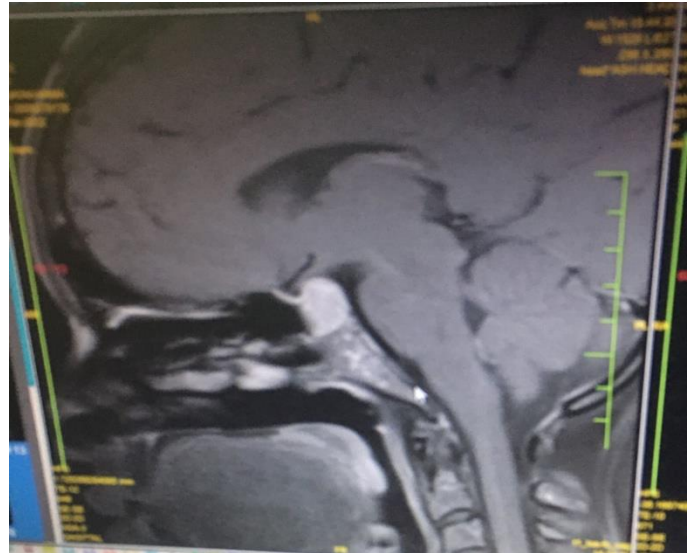
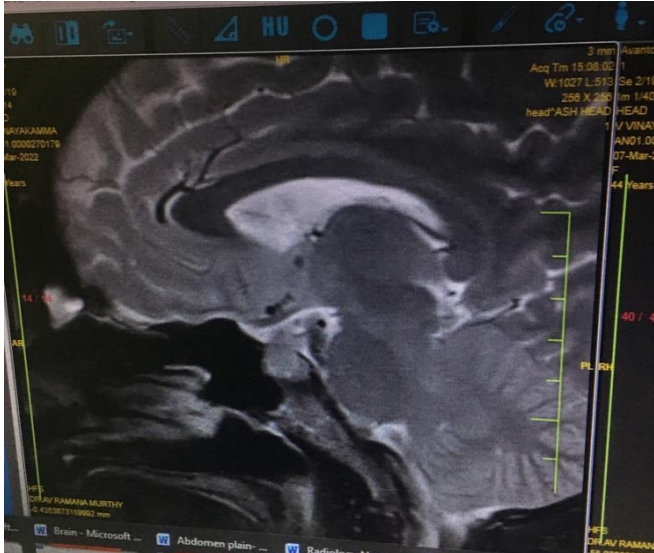
## Case of the week 06.05.2023

### **Pituitary Tuberculoma**

**Clinical history**– A 44 year old female presented with chief complaints of severe headache, left eye ache and blurred vision since 6months.

**MRI** - Enhancing mass lesion of 1.7x 1.4 cm arising from sella causing compression of optic chiasma

**Clinical diagnosis** – ? pituitary adenoma



**Gross** –Received multiple grey tan soft tissue bits altogether measuring 2x1x0.5cm

**Microscopy** – Pituitary gland parenchyma showing Well formed epithelioid granulomas consisting of epithelioid cells, langhan type of giant cells and chronic inflammatory cells . Foci of caseous necrosis is also noted

**Impression** – Pituitary tuberculoma .

**Discussion** : Intracranial TB comprises 0.15 – 5% of intracranial space occupying lesions .Pituitary tuberculosis is very rare. Early diagnosis – prevents the permanent endocrine dysfunction . Hematogenous spread or extension from tubercular infection of paranasal sinuses are possible etiological factors. Pituitary adenoma comes under differential diagnosis as both share same clinical and radiological findings. Thickening and nodularity of pituitary stalk in radiological scan is one diagnostic clue and histopathological examination helps in confirmation of diagnosis.