Abstract

Primary tuberculous liver abscesses are rare. We report on 3 patients who presented with a nonresolving abscess in the liver. Clinical presentation and sonographic findings in each case were nonspecific. A diagnosis of tuberculosis was established with microbiologic examination of pus in 2 cases and examination of an excised abscess wall in 1 case. Needle aspiration (1 patient) and short-term (72 hours) catheter drainage (1 patient) were unsuccessful, and surgical excision was required in these patients. In the third patient, continuous catheter drainage over 18 days resulted in cure, indicating that long-term catheter drainage with antituberculous chemotherapy may be a viable alternative to surgery in the management of primary tuberculous liver abscess.