



Case illustrated

Selfie-diagnosed tuberculosis

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A 22 year-old man, born in Chad but living in Montreal for 1 year, took a selfie and noted a protuberance on the side of his neck (Fig. 1). He was otherwise asymptomatic and in good health. He sought medical attention leading to a suspicion of lymphoma. As part of the investigations, a CT chest was done prompting an Infectious Diseases consultation. At the time of evaluation, the swelling of the neck had become more pronounced (Fig. 2), but he was otherwise asymptomatic. Fine-needle aspiration of the swelling revealed copious pus (Fig. 3) which was microscopy-negative for acid-fast organisms but grew pansusceptible *Mycobacterium tuberculosis* in broth culture.

CT scan of the chest revealed tubular calcified branching opacities in the superior segment of left lower lobe interpreted to be sequela of old granulomatous disease. To test for ongoing pulmonary disease, sputum induction was done. All three induced sputum cultures were negative for acid-fast bacilli and negative for *M. tuberculosis* by culture. With 2 months of 4 drugs (isoniazid, rifampin, pyrazinamide, ethambutol) followed by 2-drug therapy to complete treatment, there was resolution of the neck swelling (Fig. 4).

The proliferation of online medical resources has contributed greatly to “self diagnosis”, for which there is a Wikipedia entry and billions of results on Google search. In contrast, “selfie diagnosis” is uncommon, with examples such as facial asymmetry due to a stroke. To our knowledge, selfie-diagnosed tuberculosis has not been described although selfies have been investigated to monitor treatment adherence. In this case, our patient was able to detect neck asymmetry due to an otherwise clinically-inapparent cervical adenitis. A distinct advantage of selfies is that the patient can bring images to different healthcare

providers involved from referral to diagnosis to treatment, providing a new dimension to patient-centred care.

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Both authors evaluated and treated the patient, and co-wrote this brief case report.

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Ethical approval

N/a.

Consent

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Conflicts of interest

NO conflicts of interest.

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Fig. 2. Photo credit: picture provided by Moussa Ali.



Fig. 3. Photo credit: picture provided by Makeda Semret.



Fig. 4. Photo credit: picture provided by Moussa Ali.