

CASE REPORT

EMPYEMA THORACIS DUE TO NOCARDIOSIS AND *MYCOBACTERIUM TUBERCULOSIS* MIXED INFECTIONS IN AN AIDS PATIENT

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Abstract. A 26-year-old Thai man presented with progressive dyspnea for four months and right pleuritic chest pain two days before admission. The chest radiograph showed massive right pleural effusion. Thoracentesis was done, and the culture grew *Nocardia* spp as well as positive strain for acid-fast bacilli. An anti-HIV test was reactive, with a CD4 count of 12 cells/mm³. The patient was treated with inter-costal tube drainage (ICD) inserted for empyema thoracis. The antimicrobials used trimethoprim-sulfamethoxazole and anti-TB drugs CAT-1 orally. One month later, anti-retroviral therapy with HAART was initiated. At follow-up after 6 months, he was healthy appearing, with a nearly normal chest radiograph.

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