Secondary Amyloidosis Accompanied by Chronic Airway Infection with Non-tuberculous Mycobacterium and \textit{Pseudomonas Aeruginosa}

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Abstract

A 51-year-old woman, with history of repeated respiratory infection due to bronchioectasis from childhood, was admitted to a hospital because of a diarrhea that lasted for four months and an exacerbation of cough and sputum. A chest computed tomography showed centrilobular nodules, mucoid impaction and saccular bronchiectasis with fluid accumulation. The biopsy specimens obtained from the stomach, ileum and colon demonstrated the deposition of amyloid protein. The patient was diagnosed as secondary amyloidosis accompanied by chronic airway infection with non-tuberculosis mycobacterium and \textit{Pseudomonas aeruginosa}; however, she subsequently had to receive hemodialysis despite a conservative medical treatment with antibiotic treatment for airway infection. This case suggests that it is necessary to take care of secondary amyloidosis when patients with chronic airway infection develop symptoms of other organs such as gastrointestinal symptoms and proteinuria.

Key words: Amyloidosis, Non-tuberculosis mycobacterium, Chronic airway infection, \textit{Pseudomonas aeruginosa}