Tuberculosis (TB) is a bacteria that affects roughly a third of the population on earth and is a major cause of morbidity and mortality especially in developing countries. Lung cancer (LC) is the leading cause of cancer-related deaths for both men and women worldwide and represents a major public health problem worldwide. The association of pulmonary TB and LC in the same patient has been reported in various case series and case-control studies. We evaluated 33 patients diagnosed with both pulmonary TB and LC with histopathologic confirmation of endobronchial biopsy samples that occurred simultaneously or sequentially between 2010 and 2013 in a TB endemic region (Romania, Dolj county) of European Union. Our goal was to determine the most frequent histological type in relation with patient demographics, the bronchoscopic characters of the lesions and the period of time past since TB diagnosis in sequentially patients. Our findings led to the conclusion that LC was encountered mostly sequentially with pulmonary TB (20 vs. 13), in current or ex-smoker males from rural areas around the age of 65, and the predominant histological type was NSCLC epidermoid cancer. Bronchoscopic aspects were no different than in TB free LC patients. Further analysis is needed especially for LC screening purposes in TB endemic regions worldwide.