

FATAL CNS INFECTION IN AIDS PATIENTS : CASE REPORT

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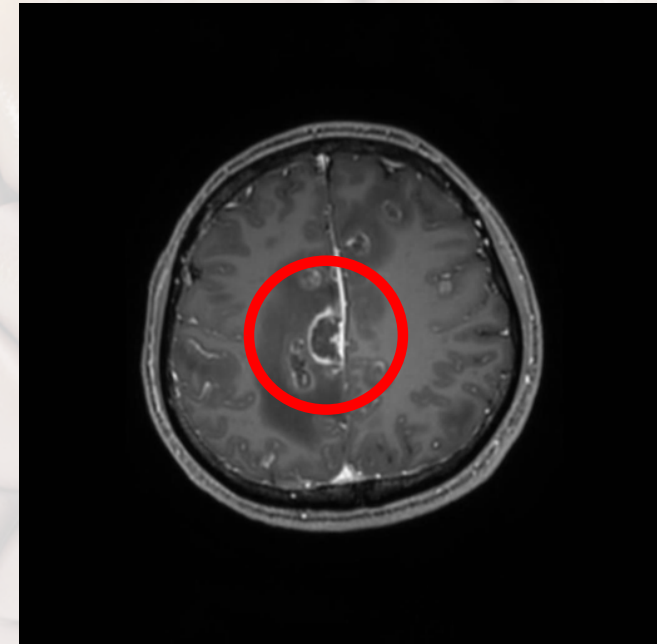
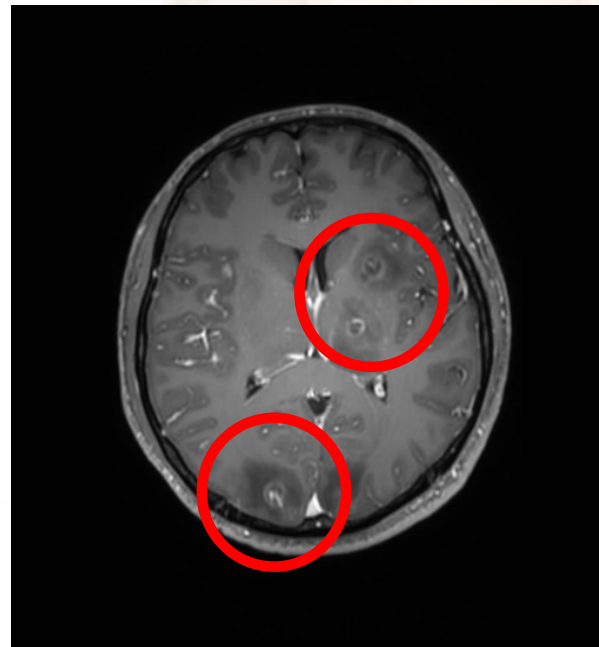
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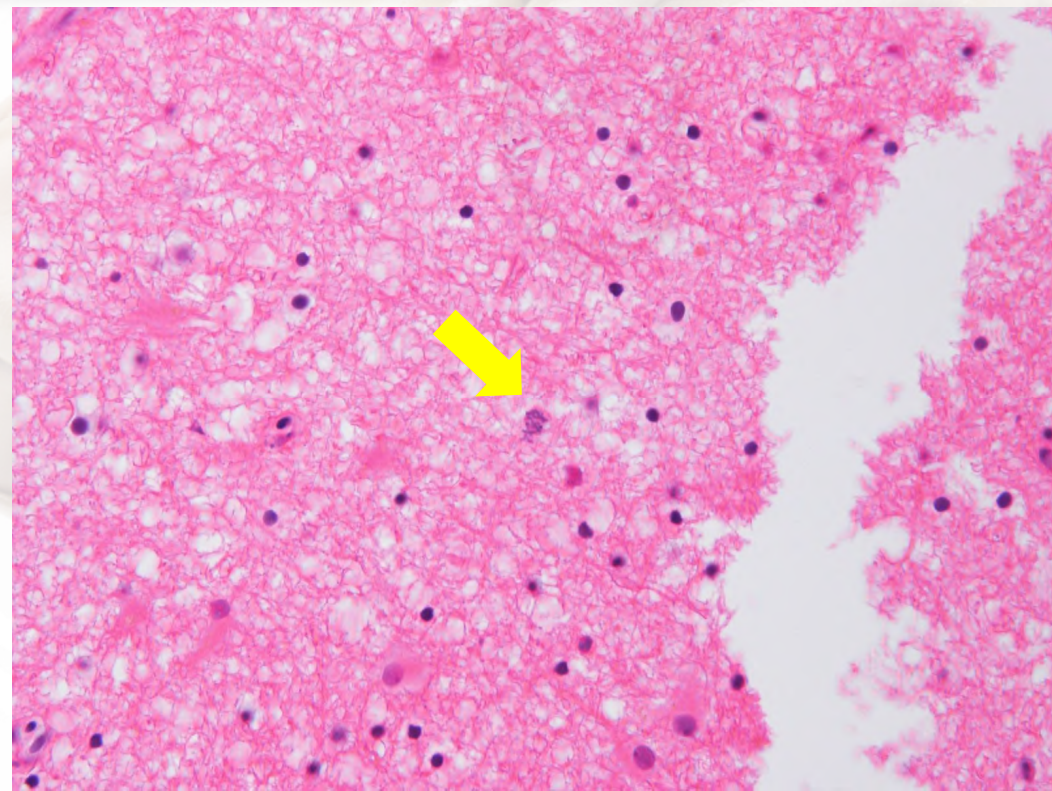
CASE

- M / 34yrs
- Thai
- **Chief Complaint (2022/12/31)**
 - ✓ Headache without traumatic event
 - ✓ Vomiting
- **N/Ex.**
 - ✓ M/S Drowsy
 - ✓ GCS E4M5V4
 - ✓ Pupil 3mm 3mm prompt
 - ✓ Motor all gr 4
- **Past medical history**
 - ✓ **HIV Infection**

PRE OP BRAIN MRI(T1 ENHANCED) (23/01/09)



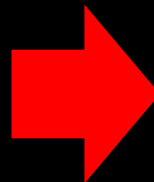
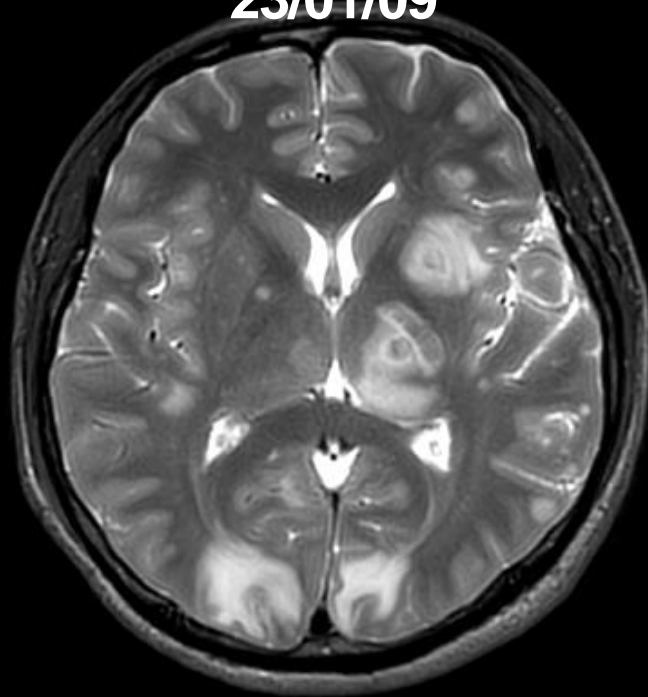
POST OP



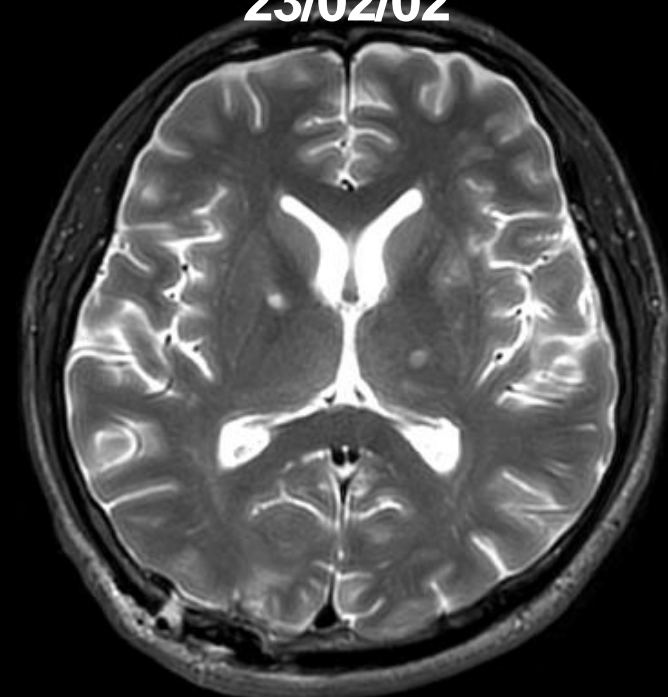
Toxoplasma gondii cyst in brain tissue. Hematoxylin-Eosin stain (original magnification X400)

BRAIN MRI T2

23/01/09



23/02/02



CNS TOXOPLASMOSIS

- **Symptom : HA(m/c), focal neurological deficit, fever and altered M/S**
 - ✓ Seizures, psychomotor or behavioral changes, cranial nerve palsy, ataxia, and visual abnormalities
- **Imaging : MRI preferred**
 - ✓ **CT : multiple hypoattenuating or isoattenuating** lesions representing abscesses with surrounding vasogenic edema and mass effect.
 - ✓ **MRI : hypointense** lesions on T1WI, **high or mixed signal intensity** on T2WI and FLAIR, **rim-enhancement with surrounding hypointense areas** on contrast-enhanced T1WI
 - ✓ **Rarely solitary** lesions, **calcifications** (Common in congenital toxoplasmosis)
 - ✓ **Typical : Multiple ring-enhancing** lesions in **basal ganglia, frontal lobe, and parietal lobe** with surrounding edema

CNS TOXOPLASMOSIS

- Treatment

- ✓ Prevention : **Trimethoprim/Sulfamethoxazole**

- ✓ Treatment : **Pyrimethamine + Sulfadiazine**

- **Atovaquone** for the latent phase

- ✓ Course

- Clinical improvement in 7 days of treatment : 86%

- Radiographic improvement in 14 days of treatment : 95%

- ✓ **Start combined antiretroviral therapy(cART) within 2 weeks** after the initiation of cerebral toxoplasmosis treatment

CNS TOXOPLASMOSIS

- **Conclusion**

- ✓ Currently, **about 13,000** patients suffer AIDS in South Korea
- ✓ Neurologic manifestation with such immunocompromised patient should go through minute CNS examination including brain images
- ✓ When **multiple, typically over 5 lesions, bilateral, ring enhanced and edematous lesions** are found in the brain, CNS toxoplasmosis may be possible and **should be treated immediately** even if other conditions have not been excluded