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C0377 - BRAIN ABSCESS AFTER SCALP KERATOSIC LESION MISMANAGEMENT

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Resumen

Objectives: Brain abscess after local spreading are not a scarce entity. Mostly related to middle ear or sinus infection, local spreading can also occur with skull convexity injuries. We present a case of brain abscess after local spreading of a gruesome mismanaged chronic scalp keratosis, in a 75 year old man.

Methods: A 75 year old male was referred to the Emergency department after being diagnosed of subacute right hemiparesis by his General Practitioner. The patient presented progressive motor impairment for the previous 70 days, going from fully independent to unable to perform basic activities. He did not have a record for cardiovascular risk factors, seizures, fever or headache. Systemic evaluation revealed a chronic oozing left parietal scalp wound. A previous hospitalization episode in the previous 8 weeks was registered, due to a non-symptomatic scalp injury; the subject was discharged after sample gathering for biopsy. A non-contrast brain CT scan unveiled isolated severe left parietal brain edema and harsh skull damage, subjacent to it.

Results: A brain MRI confirmed the presence of a brain abscess. He underwent surgical removal of the brain abscess, cranioplasty and cutaneous flap reconstruction as well. Relevant neurological recovery was achieved after 8 week antibiotic treatment. Histological studies detected keratosic tissue.

Conclusions: Unusual etiologies may lead to misdiagnosing and even mismanaging common diseases. Scalp invading lesions be reckoned as a potential cause or consequence of intracranial tumors.

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