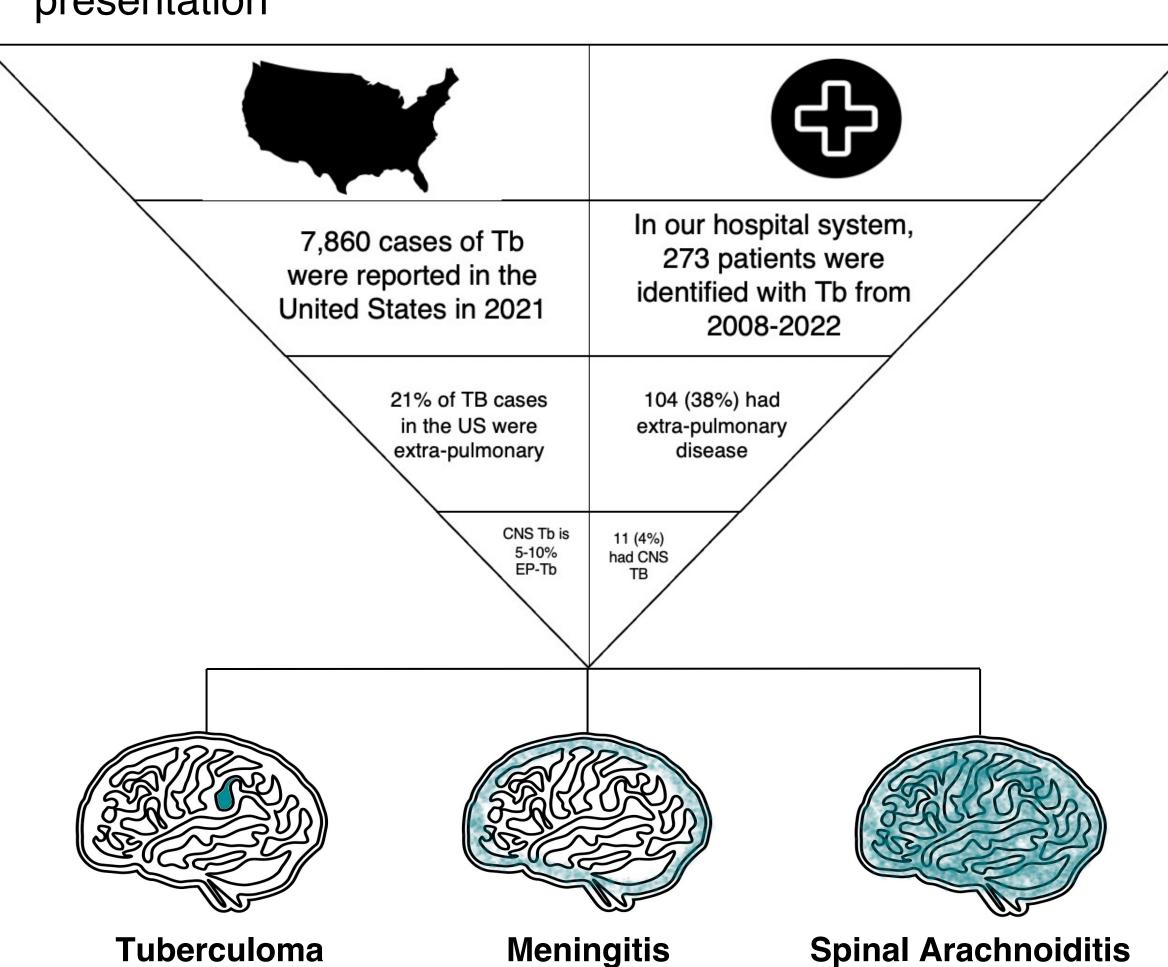
**Atrium** Health

CAROLINAS MEDICAL CENTER

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## **Aims and Methods**

- The goal of this study is to examine the presentation, diagnostic studies, and associated comorbidities of CNS-Tb
- Cases of culture-confirmed CNS-TB were identified in a hospital database from 2008-2022
- This is a retrospective case series of 11 adults with confirmed CNS-TB
- Given the rarity of this condition, there is a very little information from the past decade describing CNS-TB presentation



Inflammation of

meninges from

metastatic tuberculosis

Inflammatory process

from granulation tissue

breakdown causing

spinal cord encasement

Intracranial (or spinal)

mass formed from

granulation tissue

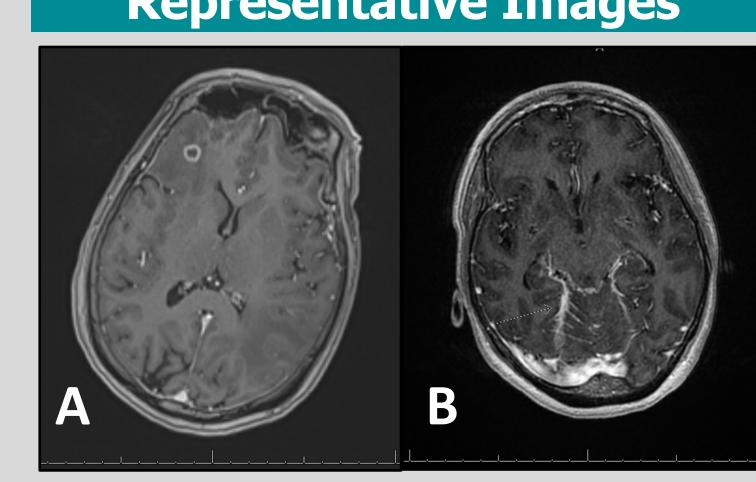
# Results

Patient Data	
Total Cases	11
Median Age	42 (23 - 55)
Gender	
Female	6 (55%)
Male	5 (45%)
Race	
Caucasian	1 (9%)
African American	9 (82%)
Asian	1 (9%)
Ethnicity	
Hispanic or Latino	1 (9%)
Not H/L	10 (81%)
HIV	
Positive	5 (45%)
Mean CD4 count (range)	100 (8-255)
Negative	6 (55%)
<b>BRMC Classification</b>	
I	4 (36%)
II	7 (67%)
III	0 i
Pulmonary Disease	5 (45%)
In hospital mortality	1 (9%) t

## **Diagnostic Data**

LP Characteristics	Total (n=9)
CSF Studies	
CSF WBC [Mean	295 (4-808)
(Range)]	
CSF Protein [Mean	605 (27-
(Range)]	4476)
CSF Glucose [Mean	31 (12-64)
(Range)]	
<b>Imaging Characteristics</b>	
Patients with Imaging (CT	11
or MRI)	
Abnormal Imaging	8
Tuberculoma	5
Arachnoiditis	1

#### **Representative Images**



- A Right frontal lobe representative of an intracranial tuberculoma
- 3 Asymmetric dural enhancement along the right tentorial leaflet suggestive of an inflammatory meningoencephalitis

### Discussion

- 38% of patients diagnosed with TB at our center had extrapulmonary disease compared to 17.5% reported in the literature <sup>1</sup>
- The 4% rate of CNS-TB was similar to what has been previously reported <sup>1, 2</sup>
- Our series describes abnormal diagnostic tests including abnormal brain imaging and CSF studies showing leukocytosis, pleocytosis, and hypoglycorrhachia, consistent with previously described findings <sup>3</sup>
- Although numbers were small, no significant difference was found between HIV-positive and HIV-negative patients
- Given the significant global mortality of this disease, this series highlights the need for more current studies describing the presentation and diagnostic characteristics of modern CNS-TB so clinicians can better recognize and treat the condition without delay

### References

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- 2. Wilkinson, R. J., Rohlwink, U., Misra, U. K., Van Crevel, R., Mai, N. T. H., Dooley, K. E., ... & Thwaites, G. E. (2017). Tuberculous meningitis. *Nature reviews neurology*, *13*(10), 581-598.
- 3. Thwaites, G. E., van Toorn, R., & Schoeman, J. (2013). Tuberculous meningitis: more questions, still too few answers. The Lancet Neurology, 12(10), 999-1010.