

**SWACM
FRIDAY SYMPOSIA, SEPTEMBER 7, 2018
CASE HISTORIES
TEXAS HEALTH PRESBYTERIAN DALLAS**



CASE #1

56 yo male, works in IT, from home. Presenting complaint of bitemporal headache that radiates to his occiput, joint pain, and fatigue. He was placed on 5 day course of prednisone for possible temporal arteritis polymyalgia rheumatica syndrome, and improved until prednisone was stopped. He was found sitting on the ground and very confused. He could not find his way to his dentist who he had been seeing for 16 years.

Upon arrival at the community hospital ED he demonstrates confusion and unsteady gait. He has no fever, and other blood work is unremarkable. His CSF shows 220 WBC, 93% lymphocytes with protein of 93 mg/dL, gram stain and cultures are pending. He is empirically treated with vancomycin, ceftriaxone, and acyclovir. His physical exam is unremarkable except for eczema on his right forearm. He has a history of bug bite and the area is slightly swollen.

He is transferred to higher level of care for obtundation and presumed lymphocytic meningoencephalitis. What is your differential diagnosis? What infectious disease testing would be helpful in this case?



CASE #2

69 yo female admitted with confusion speech impairment, imbalance and incoordination. CT of the brain demonstrates multiple masses right frontal, basal ganglia, and left cerebellar, 3.8 cm, 2.5 cm, and 2.0 cm respectively. The lesions are cavitory and enhancing. Lymphoma, metastatic neoplasm, and brain abscess are included in the differential diagnosis. The patient has not traveled but is an avid gardener. She has a history of remote cataract surgery and recent tooth abscess. Which infectious diseases are most likely to result in multiple brain masses?



CASE #3

The patient is a 57 yo male who visits the ED for intractable headache. He reports that he has had these symptoms before and was diagnosed with viral meningitis. A lumbar puncture demonstrates 116 WBC, 100% lymphocytes and protein of 97.9 mg/dL. The patient has otherwise unremarkable physical exam and blood work. What is the most likely cause of the headache? What testing would you like to see performed?