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Lymphoma mimicking tuberculosis: A case report

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Primary Central Nervous System (CNS) Lymphoma (PCNSL) represents less than 1% of all primary brain tumors. PCNSL and CNS tuberculosis are often misdiagnosed because of the similarities in clinical manifestations. The authors present an 18 year old immune-competent teenage male who presented with symptoms of fever, weight loss, photophobia and headache of 3 weeks' duration. Preliminary investigations revealed elevated Erythrocyte Sedimentation Rate and cerebrospinal fluid with high lymphocyte count borderline reduced glucose and elevated protein levels. Radiological investigations revealed leptomeningeal enhancement of posterior fossa with patchy infarcts over basal cerebral structures, a small ring-enhancing pontine lesion with communicating hydrocephalus. Patient was treated as a case of TB meningitis with tuberculoma and was started on anti-tubercular treatment with regular steroids. However, all laboratory investigations were negative for TB growth. The patient then underwent insertion of ventriculo-peritoneal shunt. Following 9 months later, patient presented with worsening headache. Magnetic resonance imaging brain revealed new large ring-enhancing lesions over right cerebellum and right parietal regions. He subsequently underwent craniotomy and excision of the cerebellar lesion. Histopathological examination confirmed features of Primary CNS diffuse large B cell lymphoma. We conclude that clinicians need to be aware of the protean manifestations of PCNSL and its misleading presentations. Tissue biopsies of accessible lesions should be obtained when there is diagnostic dilemma. Interestingly, this case also reveals that PCNSL diagnosis could still be obtained despite prolonged steroid therapy albeit uncommon.

Biography

Theanmullai Palanisamy has obtained her Medical Degree (MD) from Udayana University Bali, Indonesia before completing two years training in Tengku Ampuan Rahimah Hospital, Klang, Malaysia. She has been attached to Sabah Neurosurgical Department for the past 10 months. As a Medical Officer in this renowned field, she has garnered her experiences in managing neurosurgical patients in general ward, clinic, acute and emergency setting as well as skilled in basic and lifesaving surgical procedures.

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