CASE REPORT

SINUSITIS

An unfortunate case of Chronic Sinusitis complicated with Brain Abscess and Brain Infarct - a case report

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ABSTRACT

We present a case report of a patient presenting with collapse and eventually developing frontal lobe abscess and infarct confirmed by a CT scan. This case represents a rare “brain abscess” complication of chronic sinusitis.

INTRODUCTION

Frontal lobe abscess and brain infarct are the rare complications of chronic sinusitis. But yet extremely severe ones. We present the case of a patient with sudden collapse. Frontal lobe abscess, secondary to chronic sinusitis was confirmed on a CT scan. Functional endoscopic sinus surgery and open frontal sinus washout was done. But patient deteriorated further requiring frontal craniostomy, evacuation of abscess and partial frontal lobectomy. This case is a rare presentation of brain abscess secondary to chronic sinusitis yet severe.

CASE REPORT

A 45-year old English Gentleman from London presented to A&E department of Ealing hospital with sudden collapse and right temporal headache.

Past medical history included Chronic Sinusitis years ago. He was a known chronic smoker and works as a baker. He had broken his nose thrice.

His General examination revealed local Tenderness over frontal area, but was otherwise normal.

A CT scan was organised which revealed frontal lobe abscess secondary to chronic sinusitis. A functional endoscopic sinus surgery and open frontal sinus washout was done but immediately after surgery patient started
deteriorating. His GCS score dipped to 9/15 with increase in intracranial pressure.

Percutanous tracheostomy was done and an urgent CT scan revealed right frontal lobe low attenuation consistent with infarction and oedema with compression / displacement of the anterior horn and small area of infarct on left frontal lobe.

Patient was operated upon with frontal craniostomy, evacuation of abscess and partial frontal lobectomy

Afterwards patient recovered gradually but developed left lower lobe pneumonia with pleural effusion which was treated by US guided chest drainage and broad spectrum antibiotics.

DISCUSSION

Chronic sinusitis is a common infection of sinuses with an uncommon complication of brain abscess. Clinical manifestations of chronic sinusitis are generally: fever, headache, nasal congestion and postnasal drip. Usually patients with chronic sinusitis are easy to treat and prognosis is excellent.

We present our patient as a rare complication of chronic sinusitis with atypical presentation. We also present the possible obstacles faced during treating such complications of chronic sinusitis, the burden of morbidity, physical and psychological trauma faced by patient by the disease which we can avoid with a complete course of antibiotic.

REFERENCES

[3] Charing Cross Hospital, Department of Surgery.
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