

中文題目：近似腫瘤轉移表現之罕見麴菌性脊椎炎與椎間盤炎－個案報告

英文題目：Rare case of aspergillus spondylitis and discitis mimicking metastatic tumor

作者：王唯堯^{1,2}, 張正修^{1,3}

服務單位：¹ 中山醫學大學醫學系, ² 中山醫學大學附設醫院內科部感染科, ³ 神經外科

Introduction: *Aspergillus* spp, a trimorphic filamentous and saprophytic fungus, is widely distributed in environment especially in soil. Infections by *Aspergillus* result from aerosol inhalation of conidia and cause disease from allergic bronchial pulmonary aspergillosis (ABPA) to chronic pulmonary aspergillosis (CPA) and invasive aspergillus (IA).

Case presentation: A 72-year-old female who received the diagnosis of adenocarcinoma of lung, stage IVa (T4N3M1) with metastasis to cerebellum in 2019, and she has received scheduled courses of chemotherapy and radiation therapy. The previous bone scan on July 21st, 2020 showed no obvious metastatic lesion in bony tissue. She was admitted to our hospital on August 2nd, 2021 with complaints of progressive low back pain with radiation to both lower limbs and weakness for months. The repeated bone scan showed an abnormal photopenic area with marginal increased uptake over L2-L3 area which osteolytic bony metastasis was suspected. MRI of spines showed infiltrated lesion with enhancement of epidural and paravertebral regions of L2-L4 with compression to dura sac. Under the impression of tumor metastasis with spinal cord compression, decompression surgery with laminectomy and dura sac decompression of L3 via endoscopy was done on the 3rd day of admission. Bacterial culture and fungal culture of resected lesions yielded no growth after 28-day culture. The histopathologic examination showed necrotic cartilage and bone tissue with clusters of septated fungal hyphae of aspergillus, which the PAS and GMS stains also revealed positive for fungi. Voriconazole was prescribed with 6 mg/kg Q12H of 1 day for loading dose and then 200 mg twice a day till present time under the diagnosis of invasive aspergillus spondylitis and discitis. The symptoms of spinal cord compression resolved partially after decompression surgery and appropriate antifungal therapy.

Discussion: After reviewing the literature, osteoarticular infections by aspergillus have rarely been reported in immunocompetent and immunocompromised patients. Aspergillus spondylitis and discitis may mimic metastatic tumor of spines without particular manifestations or biologic markers until confirmation by histopathologic examination.