

中文題目：克雷伯氏肺炎腦膿瘍以高劑量 TMP/SMZ 的治療經驗

英文題目：Klebsiella pneumonia brain abscess presenting like cryptococcoma over bilateral basal ganglia, and great response under high dose of TMP/SMZ

作者：溫家慧<sup>1,2</sup>，李雋元<sup>1,2</sup>

服務單位：<sup>1</sup>高雄醫學大學附設醫院內科部；<sup>2</sup>高雄醫學大學附設醫院感染內科

Abstract

*Klebsiella pneumonia* brain abscess is not a common etiology of brain abscess. The majority of *Klebsiella pneumoniae* brain abscess are located on the frontal and temporal area, and the standard regimen is uncertain. Here we presented a 66-year-old female, with underlying disease of hypertension and hepatitis C virus, with initial presentation of conscious change and fever. The final diagnosis was possible *K. pneumonia*-related infective endocarditis complicated with endogenous endophthalmitis, bacterial meningitis and brain abscess. The initial site of brain abscess was located over the bilateral basal ganglia, manifesting like cryptococcoma. The clinical condition of meningitis improved, but the following brain MRI disclosed deterioration of brain abscess under the standard regimen of Ceftriaxone and Meropenem. Considering the poor response of beta lactam agent (ceftriaxone and meropenem) under subsided meningeal inflammation and the high penetration of brain blood barrier of TMP/SMZ, we added high dose of TMP/SMZ. The clinical condition and follow-up of brain MRI showed great improvement. The case highlighted the unusual presentation of *K. pneumonia* brain abscess and great improvement under high dose of TMP/SMZ.