A Tuberculosis (TB) meningitis suspected case managed with information in Japanese

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Introduction:
We look for information when treating a challenging disease. There are many informations and searching method will be important. Many Physicians do this in English. But some times languages other than English may be more useful, specially when the disease is endemic. Here we report a case suspected of tuberculosis meningitis suggesting these facts.

Case Description:
A 58-year-old man developed fever 4 days before admission. 2 days before admission he had double vision, and had altered mental status on the day of admission. He works for a publishing company, was healthy with a normal height and weight.
On examination, temperature was 40°C, blood pressure was 136/86 mm Hg, pulse 98 beats per minute. He had diplopia on left lateral gaze and no meningeal irritating signs. He had no abnormalities with his blood test. His Cerebrospinal Fluid (CSF) showed an mononucleosis with a cell count of 399/3/μl, elevated protein of 209.5 mg/dl, and a decreased CSF-to-serum glucose ratio of 0.4. The acid fast stain and PCR for TB was negative for three times. Though his CSF-to-serum glucose ratio suggesting the probability of TB meningitis, we were confused with the acute course and the negative acid fast stain and PCR. Using the Clinical Diagnosis Score of The Japanese TB meningitis guide line, we started to treat him as TB meningitis on the 20th day of admission. He improved with the treatment and is being treated at the out patient clinic now.

Discussion:
The sensitivity of tests against TB meningitis are low and oftenly the diagnosis will be challenging. First we looked for information but could not get it in English. TB is less seen in areas that provide useful sources in English. On the other hand, TB is much more seen in Japan. Information of endemic disease may be available in their local language and searching them in their language could help physicians and patients.