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## CASE REPORT

### A Fatal Case of a Huge Brain Abscess Misdiagnosed as Migraine Headache in an 18-Year-Old Woman

*Cas Mortel d'un Énorme Abscès Cérébral Diagnostiqué à Tort Comme une Migraine chez une Femme de 18 Ans*

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#### ABSTRACT

**BACKGROUND:** Mortality associated with delayed diagnosis of brain abscess is high. A high index of suspicion in conjunction with the use of neuroimaging is important for the early diagnosis of brain abscess. Early use of appropriate antimicrobial and neurosurgical care improves outcomes.

**METHODS:** We report a fatal case of an 18 year old female with a huge brain abscess who was misdiagnosed as a case of migraine headache over a 4-month period in a referral hospital.

**REPORT:** An 18-year-old female with a missed history of recent furuncles occurring in the right frontal part of her head and right upper eyelid who presented with a recurrent throbbing headache to a private hospital over 4 months. There was a positive maternal history of episodic headaches, as such, the patient was diagnosed as having a migraine headache disorder at the private hospital. The patient was referred to our facility on account of repeated seizures over 2 days and lapsing into a coma. Clinical examination showed evidence of focal neurologic deficits and a suspicion of brain abscess was confirmed with an urgent cranial MRI. She succumbed to her illness within 3hrs of presentation.

**CONCLUSION:** Detailed history, a high index of suspicion, use of appropriate neuroimaging and early diagnosis is important in reducing the mortality associated with brain abscess. **WAJM 2023; 40(5): 565–567.**

**Keywords:** Brain abscess, Primary headache, Secondary headache, Migraine headache.

#### RÉSUMÉ

**CONTEXTE:** La mortalité associée à un diagnostic tardif d'abcès cérébral est élevée. Un indice de suspicion élevé associé à l'utilisation de la neuro-imagerie est important pour le diagnostic précoce de l'abcès cérébral. L'utilisation précoce d'antimicrobiens et de soins neurochirurgicaux appropriés améliore les résultats.

**MÉTHODES:** Nous rapportons le cas mortel d'une jeune femme de 18 ans atteinte d'un énorme abcès cérébral qui a été diagnostiqué à tort comme un cas de migraine sur une période de 4 mois dans un hôpital de référence.

**RAPPORTS:** Une jeune femme de 18 ans, sans antécédents de furoncles récents survenus dans la partie frontale droite de la tête et sur la paupière supérieure droite, s'est présentée dans un hôpital privé avec des céphalées lancinantes récurrentes sur une période de 4 mois. Les antécédents maternels de maux de tête épisodiques étant positifs, la patiente a été diagnostiquée comme souffrant de migraines à l'hôpital privé. La patiente a été adressée à notre établissement en raison de crises épileptiques répétées pendant deux jours et d'une chute dans le coma. L'examen clinique a révélé des déficits neurologiques focaux et une suspicion d'abcès cérébral a été confirmée par une IRM crânienne urgente. Elle a succombé à sa maladie dans les 3 heures qui ont suivi sa présentation.

**CONCLUSION:** Une anamnèse détaillée, un indice de suspicion élevé, l'utilisation d'une neuro-imagerie appropriée et un diagnostic précoce sont importants pour réduire la mortalité associée aux abcès cérébraux. **WAJM 2023; 40(5): 565–567.**

**Mots clés:** Abscès cérébral, Céphalée primaire, Céphalée secondaire, Migraine.

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Abbreviations: DWI, Diffusion Weighted Image; MRI, Magnetic Resonance Image; PCV, Packed Cell Volume.